Quality Assurance – A Comparative Analysis of South Africa's Occupational Learning System (OLS)

By

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DECLARATION

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ABSTRACT

The study was prompted by a quality assurance (QA) practice that is limited in terms of efficacy and efficiency within the culture of vocational institutions. This issue is widespread even with the presence of numerous criteria, guidelines, policies, templates as well as legislative frameworks in vocational institutions (specifically in private and public vocational institutions). What has contributed to this discrepancy was the genesis of generic monitoring and evaluation (M&E) requirements such as the relationship between provider and external moderator; the QA department's knowledge of QA practices and procedures including technological QA platforms; the supervision of the QA process; the hierarchical process followed when serious quality errors are made; the efficacy of the institutions' QMS; and manipulating compliance documentation in order to achieve the desired outcome.

The study analysed and evaluated the similarities and differences identified in the findings of the private and public vocational institution's QA practice. Furthermore, it provides recommendations for both groups of institutions based on the findings, with the intention of contributing to their QA practice. This study was aimed at creating a better-quality culture that filters down to all individuals within the institution, even those who are placed at different institutional locations. Findings of this study may assist vocational institutions in improving their QA practices and procedures, and align these processes to their quality management systems (QMS). It may also contribute to employer and employee awareness that everyone within the organisation is responsible for quality.

The literature reviewed provided an understanding of the importance of QA and its relationship to M&E. The study also delivers a comparison of QA practices internationally, which entailed analysis of three vocational models of QA practices in order to determine best practices. Furthermore, it analysed and evaluated the skills development policies and legislation which governs the South African Occupational Learning System (OLS). This research is case-study based and has a qualitative research design. The primary data will be collected by means of analysing a public and private vocational institution's QMS in order to compare and contrast the similarities and differences of these institutions. Furthermore, a participatory observation was conducted in order to determine institutional QA practices. Finally, a semi-structured

questionnaire was administered to participants. The participants were purposively selected as key informants of this study. It is important to note that the intention is not to substantiate quality for the purpose of judgement, rather it is to discuss quality for the purpose of advancing best practice. Because of the competitiveness within the vocational sector, especially for private institutions, and the confidentiality of policies, this study is entirely anonymous. Pseudo codes are used throughout the empirical study.

The study found that the problematic issues identified were largely a consequence of the way in which the definitions of quality were applied to institutional QA practices; lack of internal staff capacity; the absence of technological innovation along with templates and policy guidelines that are vague as well as out-dated; and the way in which risk or non-conformance is perceived and addressed. Ultimately, the research is about determining the PROs of the QA practice in order to create opportunities for improvement.

OPSOMMING

Die studie was geinisieer deur 'n g praktyk gehaleversekening at beperk is ten opsigte van doeltreffendheid binne die kultuur van beroepsinstellings. Hierdie kwessie is omvattend selfs met die teenwoordigheid van talle kriteria, riglyne, beleid, formaats en wetgewende raamwerke in beroepsinstellings (spesifiek in private en openbare instellings). Wat tot hierdie teenstrydigheid bygedra het, was die ontstaan van generiese moniteering en evaluering (M&E) vereistes soos die lusgat binne hierdie vereistes; die verhouding tussen verskaffer en eksterne moderator; die kwaliteitsversekering departement se kennis van kwaliteitsversekering praktyke en prosedures insluitende tegnologiese kwaliteitsversekering platforms; die toesig van die kwaliteitsversekering proses; die hiërargiese proses volg wanneer ernstige kwaliteit foute gemaak word; die doeltreffendheid van die instellings se kwaliteitsbestuurstelsel en die manipulering van voldoening.

Die studie het die ooreenkomste en verskille wat in die bevindings van die privaat en openbare beroepsinstansie se kwaliteitsversekering-praktyk ingesamel is, geanaliseer en geëvalueer. Verder bied dit aanbeveel vir beide instansies op grond van die bevindings, met die bedoeling dat dit bydra tot beide die instelling se kwaliteitsversekering-praktyk. Hierdie studie het ten doel om 'n beter gehalte kultuur te skep wat na alle individue binne die instelling afskakel, selfs dié wat op verskillende institusionele plekke geplaas word. Bevindinge van hierdie studie kan beroepsinstellings help om hul kwaliteitsversekering-praktyke en prosedures te verbeter en hierdie prosesse in hul kwaliteitsbestuurstelsels te belyn. Dit kan ook bydra tot werkgewer en werknemer bewustheid dat almal binne die organisasie verantwoordlik is vir kwaliteit.

Die literatuur wat hersien is, het probeer om die belangrikheid van kwaliteitsversekering en sy verhouding tot M&E te verstaan. Die studie lewer ook 'n vergelyking van kwaliteitsversekering-praktyke internasionaal, waarby drie beroepsmodelle van kwaliteitsversekering-praktyke ontleed is om beste praktyke te bepaal. Verder het dit die vaardigheidsontwikkelingsbeleid en wetgewing ontleed en geëvalueer wat die Suid-Afrikaanse Beroepsleerstelsel beheer. Hierdie navorsing is gevallestudie gebaseer en het 'n kwalitatiewe navorsingsontwerp. Die primêre data sal versamel word deur 'n openbare en private beroepsinstansie se kwaliteitsbestuurstelsel

te ontleed om die ooreenkomste en verskille van hierdie instellings te vergelyk en te kontrasteer. Verder is 'n deelnemende waarneming gedoen om institusionele kwaliteitsversekering-praktyke te bepaal. Ten slotte is 'n semi-gestruktureerde vraelys aan deelnemers toegedien. Die deelnemers is doelbewus gekies as belangrike informante van hierdie studie. Dit is belangrik om daarop te let dat die bedoeling is om nie kwaliteit vir die doel van oordeel te regverdig nie, eerder om gehalte te bespreek vir die doel van die beste praktyk. As gevolg van die mededingendheid binne die beroepsektor, veral vir privaat instellings, en met selfvertroue van beleid, is hierdie studie heeltemal anoniem. Pseudokodes word dwarsdeur die empiriese studie gebruik.

Die studie het bevind dat die kwessies wat geïdentifiseer is grotendeels te wyte was aan die wyse waarop die definisies van kwaliteit toegepas word op institusionele kwaliteitsversekering-praktyke; gebrek aan interne personeelkapasiteit; die afwesigheid van tegnologiese innovasie tesame met formaats en beleidsriglyne wat vaag en verouderd is; en die wyse waarop risiko of nie-ooreenstemming aangespreek en waargeneem word. Uiteindelik gaan die navorsing oor die bepaling van die van die kwaliteitsversekering-praktyk saam met die skep van geleenthede vir verbetering.

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ABBREVIATIONS

ATR	Annual Training Report
BBB-EE	Broad-Based Black Economic Empowerment
CEP	Committees of Expert Practices
CET	Continuing Education and Training
CHE	Council of Higher Education
CIR	Continuous Improvement Reviews
DHET	Department of Higher Education and Training
EM	External Moderation
EQAVET	European Quality Assurance in Vocational and Educational Training
ETQA	Education and Training Quality Assurance
HRD	Human Resource Development
M&E	Monitoring and Evaluation
NQF	National Qualifications Framework
NTVQF	National Training and Vocational Qualifications Framework
OLS	Occupational Learning System
PET	Pre-employment Education and Training
QA	Quality Assurance
QC	Quality Council
QCTO	Qualifications Council of Trade and Occupations
QMS	Quality Management System
RPL	Recognition of Prior Learning
SAQA	South African Quality Assurance Authority
SETA	Sectoral Educational and Training Authority
SGB	Standards Generating Bodies
SOP	Standard Operating Procedures

TQM	Total Quality Management
TVET	Technical Vocational Education and Training
VET	Vocational Education and Training
NSB	National Standards Bodies
SDA	Skills Development Act
SDL	Skills Development Levy
SDLA	Skills Development Levy Act
WSQ	Workforce Skills Qualifications
WSP	Workplace Skills Plan

CHAPTER 1

Quality Assurance - A Comparative Analysis of South Africa's Occupational Learning System (OLS).

1.1. INTRODUCTION AND RATIONALE FOR THE STUDY

A double-digit unemployment rate has become a reality for South Africa. The root of this problem is a lack of skilled individuals or an inexperienced workforce that is the consequence of the apparent absence of systematic and effective links between education and training in the workplace. This deficiency has occurred within the developmental pathways from either university to work, or from work to university. Furthermore, there is a profound misconception about the legitimacy of workplaces being learning environments. The misconception of legitimacy should not be the case because of our labour-market needs. South Africa's education and training approach is supply-driven instead of being demand-led. The change in the nature of work within the knowledge economy has contributed to a slowness to adjust in the education and training value chain, so that these changes can be addressed (Vorwerk, 2014:54). This has resulted in concerns around a "skills crisis" in South Africa having intensified (Kruss, Wildschut, Janse van Rensburg, Visser, Haupt & Roodt, 2012:2).

As a product myself of South Africa's education system, who has had the privilege of exiting both traditional education as well as the Occupational Learning System (OLS), I have acquired an understanding of the whole system. The traditional educational system delivers one system that is predominantly theoretical, where the concepts of "pass" or "fail" are determinants of whether studies will be continued and the learning approach is driven by content as well as legislation, compliance and criteria, while on the other hand, the OLS is dominated by both theory and workplace practice together with three opportunities to develop competence, and it is a system governed by legislation, compliance and criteria which is similar to the traditional system.

A private training provider, registered with the Department of Higher Education and Training, was one of the key role-players consulted in order to understand quality assurance practice. The quality assurance (QA) process was observed and exercised at the start of a learning programme and at the end of one; in some cases, this process would also be practiced six months into a full qualification. Initially, the practice of QA took place with limited knowledge that this system

was governed by certain requirements and organisational policies and procedures, i.e. the Quality Management System (QMS).

The introduction to exercising QA practices started with compliance evaluation. Kiley and Coetzee (2013:451) emphasise that compliance evaluation, which is also referred to as quality audit or quality evaluation, is a mandatory activity for all skills development providers. This tool ensures that the organisation's compliance is aligned to national and international quality standards for outcomes-based and work-based skills development practices (Kiley & Coetzee 2013:451). Furthermore, the quality audit is defined as a process which occurs in three parts (Woodhouse, 2003:133; ISO 9000:2015); this process involves checking:

- Whether the planned procedures which relate to the stated objectives are suitable;
- Whether the actual activities conform with the plans; and
- Whether the effectiveness of activities is achieved in the stated objectives.

Notably, within this process the term 'quality' is omitted. Woodhouse (2003:133) claims it is because the meaning of quality is indirect in that a quality audit is a checking tool to determine whether the organisation's structure along with its activities is suited to the organisation's purpose or objectives, as noted in the engagement with the provider.

Yingqiang and Yongjian (2016:16) assert that a quality culture encourages every educational institution to define quality in terms of its own history, mission, objectives, location and environment, and to cultivate a quality culture awareness which naturally brings together numerous internal stakeholders, including administrators, management, facilitators and learners to work together so that quality can be improved.

The three-part process, linked to quality assurance, was practised and the internal quality audit was essential from the start of a learning programme through to the internal moderation process, and it ends when a learner's portfolio of evidence needs to be prepared for External Moderation (EM), which is conducted by the relevant QA body. Once learning and observing that there were systems and processes in place when conducting a quality audit, it was evident that these processes were not being practised at the provider's other training sites when quality control took place. It then became clear that the importance and understanding of the QA practice was restricted and that a quality culture has not been standardised.

The notion which underpins the philosophy of education, training and development quality is that quality should be managed and audited in order to guarantee a learning experience of high quality (Meyer & Orpen, 2012:293). In essence, current research suggests that the term 'quality' has been applied to many attributes, consisting of *excellence*, *value for money*, *conformity*, *transformation* and *value added* (Harvey & Green, 1992:1; Green, 1994:13-15; Sallis, 2002:13-14; Woodhouse, 2003: 133; Mhlanga, 2013:23-25). All these are valid goals for any educational institution. It could be said that an institution exhibits quality *if* it is doing what is necessary to attain its organisational goals, that is, if it is fit for purpose (Woodhouse, 2003:133-134).

Often there are limitations which prevent institutions from manifesting quality. These include: poor administration and supervision; a lack of co-ordination amongst vocational institutions and their governing entity; a deficiency in the number of qualified personnel within an institution; poor assessment methods; inadequate monitoring within the institution; and a disregard of external feedback (Idialu & Alli, 2013:443-435). All of this diminishes the institution's QA process even further and mandatory requirements place increasing pressure onto quality management systems and associated implementation requirements.

In recent years educational institutions have seen an immense increase in autonomy (Spanbauer, 1992 as cited in Sallis, 2002:70). Yet they are still governed within the parameters of the South African Qualifications Authority (SAQA), the Qualifications Council of Trade and Occupations (QCTO), its constituent Sectoral Educational and Training Authority (SETA) and legislation. However, what is absent within these policies and legislative frameworks is a guide on how an organisational quality culture should be created and sustained so that the QA process can be conducted in a consistent manner and best practice implemented. Obviously, not all vocational institutions are the same, but the requirements for external moderation are. Regardless of the organisational structure, the process of QA practice should remain constant.

1.2. RESEARCH PROBLEM AND OBJECTIVES

The study was prompted by a QA practice that is limited in terms of efficacy and efficiency within the culture of vocational institutions. This issue is pervasive even with the presence of numerous criteria, guidelines, policies and legislative frameworks in vocational institutions (specifically in private and public vocational institutions). What has contributed to this discrepancy was the genesis of generic M&E requirements such as the relationship between provider and external moderator; the QA department's knowledge of QA practices and

procedures including technological QA platforms; the supervision of the QA process; the hierarchical process followed when serious quality errors are made; the efficacy of the institutions QMS; and manipulating compliance documentation in order to achieve the desired outcome.

These issues impact on quality as they create a repetitive cycle with respect to what are the compliance requirements and processes needed to meet external quality assurance requirements. The purpose of this study is to interrogate QA practices within a public and private vocational institution and assess the implementation of quality management systems which have been developed to meet the organisational goals as well as the objectives of the National Qualifications Framework (NQF) and relevant policies and legislative frameworks. The study may contribute by underlining the strong points of QA practices and at the same time, it may reveal gaps within this practice and hence also contribute to the development of a systematic model for QA practices for all vocational institutions.

The research objectives for this study are:

1. To examine the importance of QA and its relationship to M&E;
2. To identify and compare the best QA practices internationally;
3. To assess the institutional requirements of QA practices for vocational institutions which underpin occupational learning and quality assurance in South Africa;
4. To identify and compare the best QA practices, in order to analyse the similarities and differences collected in the data obtained from the private and public vocational institutions;
5. To provide recommendations for both institutions based on the findings from the analysed data with the intention of contributing to improving their QA practice.

The study hopes to establish an integrated model of best QA practices which is aimed at creating a better-quality culture that filters down to all individuals within the institution, even those who are placed at different institutional locations. Findings of this study may assist vocational institutions in improving their QA practices and procedures, and align these processes with their quality management systems. It may also contribute to employee awareness that everyone within the organisation is responsible for creating and maintaining quality.

1.3. RESEARCH DESIGN AND METHODOLOGY

The main purpose of this study is to investigate and compare the QA practices of a private and a public vocational institution. For this purpose to be achieved, a suitable design and methodology for the study had to be carefully chosen. A research design is the framework or blueprint of how the researcher plans to conduct the research study, whereby the researcher obtains research subjects and collects information from them which is then analysed and interpreted (Babbie & Mouton, (2001:75); Welman, Kruger & Mitchell, (2005:52); Robson, (2011:532). These designs can be classified according to whether they are empirical or non-empirical (Babbie & Mouton, 2001:647). What follows from the research design is the research methodology; this is the process that explains the logic behind the chosen research methods, procedures and techniques that are used in order to implement the research plan (Babbie & Mouton, 2001:647; Welman *et al*., 2005:2).

The research is case study based which is qualitative in its structure. Robson (2011:136, citing Yin 2009 and 2014:17) defines case study research as a strategy for conducting research which is encompassed by an empirical investigation of a certain phenomenon within its real-life context, drawing upon multiple sources of evidence. Furthermore, Babbie and Mouton (2001:641), describe this design's aim as being to investigate a single unit of analysis; in the case of this study it would be the private and public vocational institutions' quality assurance department. Researchers often use this design when they want to gain an in-depth understanding of a process or event where the they want to explain why certain results occurred (Morra Imas & Rist, 2009:271). For this study a case-based design will provide further insight and understanding of the two vocational institutions' Standard Operating Procedures (SOPs), and ascertaining whether the necessary policies and quality assurance system are in place. What's more, the purpose is to understand this process so as to influence the policies (QMS) and practices (Quality Audit).

This qualitative approach deals with descriptions; the data are gathered by the researcher or self-reported, but in essence the data not measured precisely (Morra Imas & Rist, 2009:294). The qualitative paradigm is always intended to study human action from the perspective of the insider and emphasis is placed on observation methods and analysis, both of which "stay close" to the research subject (Babbie & Mouton, 2001:646).

This study will be conducted in three ways. As Patton (2009), noted in Morra Imas and Rist's (2009:271) research that data-collection methods for case studies can produce qualitative findings through in-depth interviews, direct observations and document analysis. Firstly, the relevant internal policies of the vocational institutions will be reviewed. The policies include the institutions' QMS. The study will then review whether an official QA process is documented (through standard operating procedures, or practically defined processes and requirements) and implemented throughout the institution in order to compare the private institution's QA process with that of the public one. Olsen (2012:3) states that the document analysis process commences when documents are identified and selected according to their usefulness or relevance as data for the research at hand. As Robson (2011:349, citing Krippendorff, 2004) states that, document analysis is a technique which produces replicable and valid interpretations from texts. In addition, this method provides an opportunity to address numerous aspects of the research, which moves beyond interviews and observations (Olsen, 2012:2).

Secondly, participatory observation of both institutions' QA process will be undertaken. Yin (2014:240) describes participatory observation as a mode of data collection which requires the researcher to become involved in the activities being studied. The aim of this observation is to acquire first-hand experience of the QA processes in both institutions from beginning (i.e. the quality audit process) to the end (i.e. external moderation process). The observation will assist in determining whether the QA practice is aligned to the QA policies. It will also allow the researcher to identify other individuals who contribute or influence QA, but are from a different department. What's more, the observation will provide an opportunity to compare and contrast the QA practice in both institutions by documenting the observation. This will allow the researcher to offer recommendations with regard to which processes are absent, or which processes should be implemented in the institutions' QA practice.

Lastly, a semi-structured interview will be conducted with the employees of the QA department, in the form of a questionnaire. An interview is most suitable when the researcher or interviewer is thoroughly involved with the research process (Robson, 2011:285). The intention of the interviews is to determine how employees view QA and whether they understand the importance of QA as well as its risks. In addition, the interview aims to determine whether other processes for improving the QA practice have been implemented that are not stated in the institutions' policies.

Case studies are non-experimental and hence there is no random selection or control groups (Morra Imas & Rist, 2009:271). For this reason, purposive sampling will fit the nature of this study. Purposive sampling is also known as judgemental sampling. Babbie and Mouton (2001:643) describe purposive sampling as selecting a non-probability sample, whereby the researcher selects the units to be observed based on his/her judgement about which ones will be the most representative for the study. However, the intention is not to substantiate quality for the purpose of judgement, rather it is to discuss quality for the purpose of best practice.

The study's data analysis is comprised of the data collected from the document analysis, participatory observations and the interviews. The raw data from the document analysis, observations and interview will be analysed through coding as well as interpretive analysis. Coding is "the process of collecting observations or responses into groups which are alike, and assigning a symbol as a name of the group" (Robson, 2011:523). The coding process will provide an opportunity to group key data aspects thematically. This will make the process of data analysis and presentation of findings easier, especially for both the institutions involved.

Because of the competitiveness within the vocational sector, especially among private institutions, this study will be entirely anonymous. What has also prompted the decision to keep this study anonymous is the confidentiality of policies as well as their uniqueness. As a result, pseudo codes will be used throughout the empirical study. The privately registered vocational institution will be coded ***Institution 1*** and its employees will be coded ***participant 1, participant 2, participant 3 etc.***, and the publicly registered vocational institution will be coded ***Institution 2*** and its employees will be coded ***participant 4, participant 5, participant 6 etc.*** in order to keep their identities anonymous.

The outline of the chapters for the study are provided below.

1.4. CHAPTER OUTLINE

Chapter 1: Introduction and Rationale for the Study

The chapter provides a brief introduction to Quality Assurance in educational institutions. It presents the rationale for the study, the research problem, the purpose and specific research objectives. The chapter concludes by outlining the chosen design and research method.

Chapter 2: Understanding the importance of quality assurance and its relationship to M&E

The chapter presents a literature review of the relevant studies. It provides a brief history of skills development in South Africa. The literature study seeks to analyse and determine the importance of quality assurance within private training institutions that promote occupational learning. The study continues by conceptualising quality and quality assurance through its approaches. The literature reflects the shift away from Total Quality Management (TQM) towards Quality Management Systems (QMS). It further discusses how quality assurance is linked to monitoring and evaluation (M&E) and determines whether quality assurance is a form of M&E. The chapter concludes by establishing the importance of impact evaluation in terms of occupational learning.

Chapter 3: Comparative experiences from international institutions

The chapter identifies common practices of QA by analysing, comparing and contrasting international education and vocational frameworks and their components. These practices are established as a benchmark against which to compare South African practices.

Chapter 4: Policies and legislation which underpin Occupational learning and Quality Assurance in South Africa

The chapter provides a timeline of skills development policies and legislation that governs the Occupational Learning System (OLS). The chapter outlines the statutory bodies that influence quality assurance within the OLS. The chapter concludes by presenting the QCTO's quality management system.

Chapter 5: Research Methodology

The chapter outlines the various activities used for collecting and managing data from the field of study along with the procedures and processes used for the purpose of analysis.

Chapter 6: Study Findings

The chapter discusses the data collected as well as the research findings from the field through analysing the two institutional QA processes and systems, and from conducting the interviews.

Chapter 7: Recommendations and Conclusion

The chapter provides an interpretation of and discussion on the research findings. The final sections present a summary of the study's findings and detailed recommendations as well as the conclusions drawn.

CHAPTER 2

UNDERSTANDING THE IMPORTANCE OF QUALITY ASSURANCE AND ITS RELATIONSHIP TO M&E

2.1. INTRODUCTION

For South Africa, 1994 marked a defining moment and complete revolution for communities who were marginalised and discriminated against (Tshilongamulenzhe, 2013:116). Regardless of this revolution, the disparity in skills remains a considerable challenge and concern for South Africa's economic and social development (Petersen, Kruss, McGrath & Gastrow; 2016:407). Warnich, Carrell, Elbert & Hatfield (2015:375) assert that South Africa's greatest challenge is rebuilding the country's economy, as the country's biggest concern is the rehabilitation of the economy together with generating inclusive growth that will result in the meaningful reduction in unemployment and poverty (Kraak, Jewison, Pillay, Chidi, Bhagwan, & Makgolane, 2013:4). Additionally, Tshilongamulenzhe (2013:117) notes and concurs with Vorwerk (2005) that in order to effectively deal with the difficulties brought about by the restructuring of the education and training system, it is essential to reduce the level of poverty as well as unemployment and achieving black economic empowerment targets faster. Given this, a new approach to skills development has been introduced, commonly known as occupational learning (Tshilongamulenzhe, 2013:117).

The Occupational Learning System (OLS) stemmed from recent reforms in skills development policy (Tshilongamulenzhe, 2013:117). The OLS was introduced in the Amended Skills Development Act (Department of Labour, 2008). This system was developed as a response to the numerous challenges to and limitations of SETAs, the Department of Education, and Labour (Stuart, 2007). Within the workplace, occupational learning forms part of Human Resource Development (HRD). According to Tshilongamulenzhe (2013:117), this pioneering way of learning was prompted by the increasing pressure to integrate education and workplace training. The designated methodology was outcomes-based learning and, as a result, unit standard-based learning is used in occupational and vocational learning (le Grange, 2011:16). Furthermore, the apparent disconnect between education institutions and training programmes as well as labour market needs required the development of systematic linkages between higher education and the labour market (Tshilongamulenzhe, 2013:117). Ultimately, these linkages would allow the learning system to collect and provide information on skill gaps, changes in occupational profiles and the requirements of new occupations (Tshilongamulenzhe, 2013:117). Bhorat, Cassim & Tseng (2014: 5-6), points out that the labour market's growth favours those who are qualified which implies, individuals predominantly with tertiary education compared to individuals with a Further Education and Training qualification.

Although South Africa has several excellent universities and colleges, a number of post-schooling institutions offer a less than satisfactory quality of education (DHET, 2013:8). Quality is positioned as the highest priority within any institution. Thus, improving quality is undoubtedly the most important task which faces any institution (Sallis, 2002:1). Harvey and Knight (1996:1) emphasise that quality can no longer be taken for granted in education. The concern about quality within the educational context is not new (Green, 1994: vii). Yet outside this sector much of the debate is focused on standards (Green, 1994: vii). The South African government has placed its focus on improving the quality of workplace training (DHET, 2013:8). As such, sound governmental policies as well as systems are required if there is to be a constructive impact on the nature, type and quality of training that is provided in workplaces (DHET, 2013:8). However, Irimiea and Serban (2015:171) emphasise that quality assurance systems have become vital in order to ensure effective, operational and sustainable standards in vocational education and training, as well as to increase the recognition of learning outcomes together with the transparency of qualifications and to promote, the mobility of learners, trainers and workers.

Quality assurance in education is established in order to validate the accreditation along with the implementation of learning in order to ensure that quality standards of provision are reviewed continuously and benchmarked against both national and organisational standards (le Grange, 2014:23). Therefore, "quality and maintaining quality requires continuous work and a structured process" (le Grange, 2014:23). According to the Department of Higher education and Training (2013:8), there is no point in growing and providing access to the post-school system, if quality is not improved. This can only occur if strong leadership institutions are in place, ensuring all educational practitioners have the required capabilities as well as support so that they can perform their functions at a high level and that they have the necessary facilities as well as equipment (DHET, 2013:8).

This literature review first provides a brief history of skills development in South Africa; it seeks to analyse and determine the importance of quality assurance within private training institutions that promote occupational learning. It explains the concepts of quality and quality assurance through its approaches. The literature reflects the shift away from Total Quality Management (TQM) towards Quality Management Systems (QMS); how quality assurance is linked to monitoring and evaluation (M&E); establishes whether quality assurance is a form of M&E; and highlights the importance of impact evaluation in occupational learning.

2.2. A BRIEF HISTORY OF SKILLS DEVELOPMENT IN SOUTH AFRICA

The history of South Africa's skills development industry is relatively new and unique (Tshilongamulenzhe & Coetzee, 2013:13). Yet in order for South Africa to achieve growth and

development simultaneously, the country needs a skills development strategy that has several elements to it (Ashton, 2004). As such, a singular model of skills development will not be suitable for implementation in South Africa (DTI, 2006; Stuart 2007). With this being said, South Africa's higher education ministry has invested in an array of skills development legislative frameworks as well as National Skills Strategies along with other structures that promote and represent a vision for a training and development system that is integrated (Tshilongamulenzhe, 2013:113). The numerous acts and frameworks have introduced new structures, requirements and funding policies for South African organisations who participate in training and development initiatives (Tshilongamulenzhe, 2013:113). As such, these policies are developed to increase investment within the skills development sector and to improve the quality of education and training within the South African economy (Tshilongamulenzhe, 2013:113).

According to Tshilongamulenzhe and Coetzee (2013:114), skills development is an important tool in allowing the South African economy to change as well as grow in line with global trends. Thus, the occupational learning systems aim to have an impact on the country's labour market in order to improve both the quality as well as the quantity of employment opportunities which are essential for maintaining sustainable economic empowerment, which in turn is a precondition for Broad-Based Black Economic Empowerment (BBB-EE) (Tshilongamulenzhe, 2013:115).

2.3. THE PROVISION OF PRIVATE EDUCATION

The Constitution along with a number of other policies and pieces of legislation promotes the role of private post-school education and training (DHET, 2013:42). Private post-school and training institutions assist in meeting the increasing demand for post-school opportunities in order to diversify the economy (DHET, 2013:42). This takes place in niche areas where public provision is inadequate or absent.

The private sector is comprised of higher education institutions as well as further education and training institutions, both of which need to register with the Department of Higher Education and Training (DHET) (DHET, 2013:42). This sector also includes institutions that specialise in shorter courses and are mainly registered with the Sectoral Educational and Training Authority, SETA (DHET, 2013:42). Often these institutions provide high-quality education, including even those who are weak and even fraudulent (DHET, 2013:42). These institutions are funded by a number of sources that include client contracts, an owner's capital, company or SETA training budgets, user fees and funds from donors (DHET, 2013:42).

At present the data provided on private-school institutions is either inaccurate, incomplete or scattered among several data sets in several institutions, which include DHET, SAQA, the

Quality Councils (QC) as well as the SETAs (DHET, 2013:42). According to DHET (2013:42), government has insufficient capacity for quality assurance among private institutions. Furthermore, neither the registration by the DHET nor institutional or programme accreditation by the QC is sufficiently adequate to ensure accountability by the private institutions (DHET, 2013:42). In part, this is due to the limited scope of the QC's activities together with the lack of resources to take on such large tasks (DHET, 2013:42). As such, these shortages may result in the quality assurance undertaken by private providers being a once-off process with partial monitoring being carried out by QCs (DHET, 2013:43).

An additional challenge with regards to quality assurance systems pertains to the complexity of the current registration process together with the quality assurance system for private providers, and the categorising and timing of a number of processes across the quality bodies (DHET, 2013:43). Within the post-school education system, quality assurance is seen as a vital requirement (DHET, 2013:52). As such, providers must follow sound standards of practice and adhere to suitable accreditation criteria (DHET, 2013:52). Furthermore, institutions that provide education must strengthen their internal capacity in order to deliver quality education (DHET, 2013:52). According to DHET (2013:43), The Department is in the process of developing better communication networks between itself, the Council of Higher Education (CHE), SAQA, Umalusi together with the SETAs, and also providing clearer processes of registration and accreditation for private providers.

2.4. QUALITY ASSURANCE

2.4.1. Conceptualising quality

The concept of quality is one that is complex, difficult to define and at times challenging to measure (Sallis, 2002:1). It is an enigmatic and elusive concept (Sallis, 2002:1, 11; Green, 1994:12). Luckett (2006:14) also defines quality as a concept that is elusive, subjective as well as value-laden, and can be related in everyday usage to what is good, excellent and even worthwhile. Quality is an elusive concept because it is such a dynamic idea (Sallis, 2002:11). The emotional and moral force of the notion of quality contributes to its being so difficult to define (Sallis, 2002:11). According to Kecetep and Ozkan (2014:660), determining an exact and common definition of quality is difficult, as it has a number of different meanings and can be used in different ways. However, Harvey and Knight (1996:1) note that the ambiguity of the notion of quality in higher education has served a useful purpose. As it is taken by autonomous non-accountable education sector (Harvey & Knight, 1996:1). But they warn that regarding quality as too ambiguous to define is careless.

Sallis (2002:1) states that one individual's idea of quality may conflict with someone else's idea. As such, the arguments around quality can be seen as representing a combat zone where

social and cultural identities may arise and be pitched against each other (Mhlanga, 2013:22). Sallis (2002:11) emphasises that it is essential to have a distinct understanding of quality's numerous meanings or there may be a risk that it becomes a simple "catchphrase," and inevitably becomes a word which conveys a high moral tone but has little practical value. Therefore, then, the way in which an institution distinguishes quality would possibly have a strong influence on the way in which quality assurance policies and strategies are formulated and implemented (Mhlanga, 2013:22).

The South African Quality Authority (SAQA) (2001:9) adds that "quality has become a discipline in its own right." Tovey (1994:1) states that quality is not dependent on the learning system; both has an impact in its own right respectively. However, Harvey and Knight (1996:1) argue that quality and purpose are two interconnected features of the "new higher education" and if we are unsuccessful in acknowledging that, then we merely create provisional categories, formulate convenience measures and yield meaningless ratings which are more concerned with the traditional concepts of education instead of a reappraisal of higher education's purpose for the twenty-first century. Similarly, Tovey (1994:2) emphasises that in order for learning to develop further in its own right, the task is to become engrossed with the concepts of quality as well as quality assurance in order to produce modes of practice which would satisfy the requirements of external bodies, i.e. QCTO and the relevant SETAs.

Throughout the world quality is being assessed; and for the purpose of these assessments, quality is being operationalised (Harvey & Knight, 1996:1). Far too often it seems as if quality assessment and quality assurance have taken place by determining *how* quality should be assessed or evaluated rather than questioning *what* it is that should be assessed (Harvey & Knight ,1996:1). Thus, the approaches to quality are grouped into five distinct, yet interrelated, ways to categorise the concept (Harvey & Green, 1992).

2.4.2. Approaches of quality

I. Quality as perfection and excellence

According to Green (1994:13), the traditional concept of quality is linked to the idea of providing a product or a service. This meaning of the term arose during the industrial age and it was used to describe whether products were good, bad or excellent (Kecetep & Ozkan, 2014:661). Similarly, Sallis (2002:12) and Green (1994:13) agree that products which display quality have an extremely high standard and cannot be surpassed. Hence, products of quality are items of perfection made with no expense to spare (Sallis, 2002:12). As a result, the definition of quality is seen in absolute terms (Sallis, 2002:15). Quality as perfection pertains to the idea of "zero defect", where the outputs of a production chain have to meet the precise specifications of the desired product (Harvey & Green, 1993: II). Yet Mhlanga (2013: 24)

emphasises that within the educational process, it is impossible to define a "perfect" graduate. Given the nature of epistemology, no matter how superior knowledge may be, such knowledge cannot ultimately ever be perfectly adequate (Mhlanga, 2013:24). However, Sallis (2002:13) and Green (1994:13) claim that within an educational context, this view of quality is in essence elitist. According to Sallis (2002:13), only a limited number of institutions are able to offer an educational experience of such a high quality to their learners. In other words, a number of learners cannot afford it and a number of institutions can only aspire to provide it (Sallis, 2002:13).

The excellence or perfection approach to quality stresses consistency within external monitoring of competence as well as service standards (Harvey & Knight, 1996:17). The emphasis placed on a continuous process of producing a zero-defect output and varies due to the exploratory nature (Harvey & Knight, 1996:17) which is present in occupational learning. This approach is primarily concerned with flawless and accessible administrative support systems within institutions (Harvey & Knight, 1996:17).

II. Quality conformance to standards or specifications

According to Green (1994:13), there is an idea of quality which entails conforming precisely to a specification of standards. Thus, quality is viewed as a relative concept (Sallis, 2002:13). Such a definition does not view quality as a characteristic of a product or a service, but instead views quality as something which is ascribed to the product or service (Sallis, 2002:13). In this view quality is about being measured against criteria (Sallis, 2002:13). Therefore, quality is not an end in itself, but is rather a means of determining whether the end product has met the specific standards. Furthermore, Green (1994:13) emphasises that it is necessary to define "standard," and states that it is the basis for a measurement in order to describe a required or specific attribute of a product or a service. This definition of quality is firstly concerned with measuring up, and secondly, with ensuring conformity to a predetermined standard (Sallis, 2002:13,14). This approach to quality is about measuring up to predetermined standards and meeting these standards on a continuous basis (Sallis, 2002:13). It is also concerned with accountability and auditing as it promotes and ensures consistency as well as conformity (Sallis, 2002:14).

According to Doherty (2012:81), within the private sector aiming for higher standards of quality is not problematic as it seems, and it encourages the consumer to trust in the quality of the product. Thus, market credibility improves through achieving and maintaining a recognised standard (Doherty, 2012:81). But academics have raised deep concerns about academic standards in the sphere of education because, compliance is a requirement to meet standards and compliance results in a loss of autonomy (Doherty, 2012:81). What's more, the adherence to standards may become a barrier to innovation and progress (Doherty, 2012:81).

III. Quality as fitness for purpose

The definition of quality adopted by most policymakers within education is that of fitness for purpose (Green, 1994:15). The label of quality is ascribed to any product or service that meets the standards set for itself (Sallis, 2002:13). In other words, quality has no meaning except in relation to the purpose of the product or the service (Green, 1994:15); the product or service must do what it claims to do, and do or produce what the customer expects (Sallis, 2002:13). Hence, fitness for purpose asks whether the good or the product does what is required or what is expected of it (Sallis, 1994:13). *However,* (Mhlanga, 2013:25) points out that this definition of quality implies a developmental approach. Green (1994:15) also recognises that quality is developmental, as purposes change over time and this requires constant re-evaluation of the appropriateness of the standard. Therefore, within education this understanding of 'fitness of purpose' may be used to analyse quality at a number of levels (Green, 1994:15). *For instance, if the purpose of occupational learning is for it to have an impact on the labour market, is the system producing a sufficient number of workplace graduates? Are occupational learning programmes providing the correct balance of workplace skills, knowledge and understanding? Are institutions accomplishing the goals and values they have set for themselves in their vision and mission?*

Quality as fitness for purpose is seen as the producer definition or the procedural concept of quality (Sallis, 2002:13). Quality is established when a producer has a system, known as a quality assurance system, which supports the consistent production of the product or service according to a certain standard or specification (Sallis, 2002:13). The procedural conception of quality places an extensive emphasis on working according to defined systems as well as procedures (Sallis, 2002:14). This method would possibly produce an outcome that is of a high quality or one that is standardised (Sallis, 2002:14). Therefore, quality is accomplished by operationalising systems and procedures as well as ensuring that the systems are operated efficiently and effectively (Sallis, 2002:14).

The fitness-for-purpose approach relates standards to the stated purpose-defined objectives (Harvey & Knight, 1996:17). Yet the purposes which are stated in mission statements or course objectives usually include a comparative component (Harvey & Knight, 1996:17). This approach tends towards clear specification of skills as well as abilities, and necessitates explicit evidence in order to recognise threshold standards (Harvey & Knight, 1996:17). According to Harvey and Knight (1996:17), professional competence is assessed against the minimum threshold of the professional body's requirements. Furthermore, purposes generally stipulate or suggest minimum service standards; these include the required standards, as indicated by the professional body, for the competent service provider as well as learner support.

IV. Quality as value for money

This approach to quality is viewed as a market perspective and is linked to accountability (Harvey & Knight, 1996:7). The use of performance indicators as well as customer charters is an attempt to effectively operationalise and legitimise this concept of quality by designing a pseudo-market, so that change is brought about through competition (Harvey & Knight, 1996:7).

Whereas the value-for-money approach emphasises a 'good deal' for the customer, typically government or the learner (Harvey & Knight, 1996:17), this approach necessitates maintaining or improving academic standards, in terms of graduate abilities as well as research output, for the same resource (Harvey & Knight, 1996:17). It also requires maintaining the supply of competent recruits and producing skilled graduates who are suitable for employment (Harvey & Knight, 1996:23). Therefore, Harvey and Knight (1996:23) state that this approach assumes that the learners' experience of teaching and learning does not decline significantly and, thus, the experience is improved through innovations which relate to the stated objectives. Lastly, this approach prioritises efficiency as well as accountability to 'customers' (Harvey & Knight, 1996:23).

V. Transformative Quality

This approach to quality is deep-rooted in 'qualitative change,' thus, a crucial form of change (Harvey & Green, 1992). Sallis (2002:14) states that this type of quality has less to do with systems and procedures and more with continuous improvement. One key aspect of this approach to quality is that doubts have emerged with regard to the relevance of "product-centred approaches," such as fitness for purpose (Harvey & Green, 1992). As such, problems have arisen when product-based notions of quality have been translated to the service sector (Harvey & Green, 1992).

According to Harvey and Knight (1996:7), the process of education is participative. Therefore, learners are not seen as products, nor are they customers, consumers, users of a service, or clients; they are active participants (Harvey & Knight, 1996:7). Thus, education is a continuous process of transformation of the participant (Harvey & Knight ,1996:7). Doherty (2012:80) argues similarly that educational practitioners have rejected the idea of learners being products and have resisted the customer paradigm to date. They ask: Who is the customer? They claim that it is absurd to recognise anyone as being the customer, as everything depends on the context (Doherty, 2012:81).

The final approach, that is transformative, uses standards in order to evaluate the enhancement of student capacities with regards to academic knowledge and a wider set of transformative

skills (Harvey & Knight, 1996:23). Although transformation involves empowerment and formative assessment, summative assessments are also required (Harvey & Knight, 1996:23). Service standards place an emphasis on required facilities that enable the process of student learning and the attainment of transformative abilities (Harvey & Knight, 1996:23).

VI. Summary

Given these approaches to quality, it is evident that there are varying definitions of quality and, to some degree, these echo the different perspectives for both the individual as well as society (Harvey & Green, 1992). Harvey and Green (1992) concede that there is not one single correct definition of quality. Vroeijenstijn (1991:109) adds that trying to define quality is a waste of time. According to Harvey and Green (1992), this is based on the view that quality is a relative concept; it is 'stakeholder-relative' and the stakeholders have different priorities and their attention may be focused on different interests. For instance, learners and facilitators may focus their attention on the process of occupational learning, while the focus of the service provider may be on the outputs of occupational learning systems (Harvey & Green, 1992). Therefore, quality must be defined with reference to a range of qualities, as it is impossible to consider quality as a discrete concept (Harvey & Green, 1992). Perhaps the best way to define quality is by defining as clearly as possible the criteria that are used by each stakeholder for judging quality, and for these conflicting views to be considered when assessments of quality are made (Harvey & Green, 1992). However, if a core criterion for assessing quality need to be determined, it is crucial that the different conceptions of quality are understood, which indicate the preferences of different stakeholders (Harvey & Green, 1992).

2.5. THE PURPOSE OF QUALITY ASSURANCE

Before any evaluation of quality is conducted, it is important to be clear about the purpose (Frazer, 1994:109). Frazer (1994:109) cautions that confusion may arise with regard to the role of the innumerable agencies that are concerned with quality, unless their specific purpose is properly understood. Although quality assurance has numerous purposes, Harvey and Knight provide the exact purpose of quality assurance and it is aligned to the research objectives. The research relies especially on this literature. According to Harvey and Newton (2005:12), quality assurance has four purposes within higher education: accountability, control, compliance and improvement.

2.5.1. Accountability

Institutions are responsible for the services they provide and the client's money they spend (Harvey & Newton, 2005:12); this is what accountability is about and is the primary aspect. It has become the central underlying rationale for the introduction of quality assurance (Harvey & Newton, 2005:12).

Following this is accountability to students (Harvey & Newton, 2005:12). They require assurance that there is organisation as well as coordination of their programme of study in order for it to run properly, and that a suitable educational experience is guaranteed and delivered (Harvey & Newton, 2005:12). This view of accountability is aligned to a fitness-for-purpose definition of quality or, if accountability is linked to inputs, to an excellence definition of quality (Harvey & Newton, 2005:12). However, when the focus shifts towards the processes of learning, then accountability moves toward a transformative definition of quality (Harvey & Newton, 2005:12).

2.5.2. Control

Control is concerned with guaranteeing the integrity of the higher education (Harvey & Newton, 2005:12) and training sector, specifically making it difficult for poor or dishonest providers to continue operating and gaining access to accreditations, adequacy criteria and registrations (Harvey & Newton, 2005:12). The control aspect of quality assurance distinctively addresses the comparability of standards, which is the academic level of the student (Harvey & Newton, 2005:12)

2.5.3. Compliance

According to Harvey & Newton (2005:13), compliance is making sure that the institution adopts the procedures, practices as well as policies that are designed by government for the correct conduct of the sector and to guarantee quality.

Also, there are other stakeholders who pursue compliance through monitoring, particularly regulatory bodies who may use quality monitoring to check that the standards and policies are adhered to and implemented (Harvey & Newton, 2005:13). As a simplification, quality monitoring encouraged, if not enforced, with compliance the production of information, whether it is statistical data, prospectuses or course documents (Harvey & Newton, 2005:13).

2.5.4. Improvement

The final purpose of quality assurance is improvement; it is less concerned with constraints and more about encouraging adjustments as well as change (Harvey & Newton, 2005:14). Harvey and Newton (2005:14) question whether quality assurance processes are set out to improve research quality, or whether it is aimed at improving standards? Furthermore, they question whether the purpose of improvement is to improve student experiences directly or whether it should improve the way in which institutions monitor their own activities; or is the purpose to enhance transparency and documentation of programme provision and information of outcomes (Harvey & Newton, 2005:14). This function of quality assurance is usually about encouraging institutions to reflect on their own practices, and to allow a process of continuous improvement of learning processes along with the range outcomes (Harvey & Newton, 2005:14).

2.5.5. Summary

It is clear that each purpose of quality assurance has a monitoring function. Accountability is also aligned to quality concepts. If quality is linked to inputs, an excellence definition of quality is considered. The next section explores the paradigm of quality from total quality management to quality management systems.

2.6. SHIFTING FROM TOTAL QUALITY MANAGEMENT TO QUALITY MANAGEMENT SYSTEMS

In addition to providing a definition of quality, it is essential to understand the difference between three other ideas of quality (Sallis, 2002:16). The three concepts where a differentiation is required are: quality control, quality assurance and total quality. Figure 2.1. illustrates the hierarchy of these concepts of quality.

According to Sallis (2002:16), the oldest concept of quality is quality control. It entails detecting and eliminating components or final products that are not up standard (Sallis, 2002:16). Green (1994:13) states that quality control pertains to testing whether the product or service meets the set standards and, if not, those that do not conform are ultimately rejected. Luckett (2006:14) defines quality control from an M&E perspective and states that it the systematic and consistent evaluation to measure or check a product or service against pre-determined standards, which results in summative judgements about the quality of the product or service. Therefore, quality control is an after-event process (Sallis, 2002:16) or retrospective.

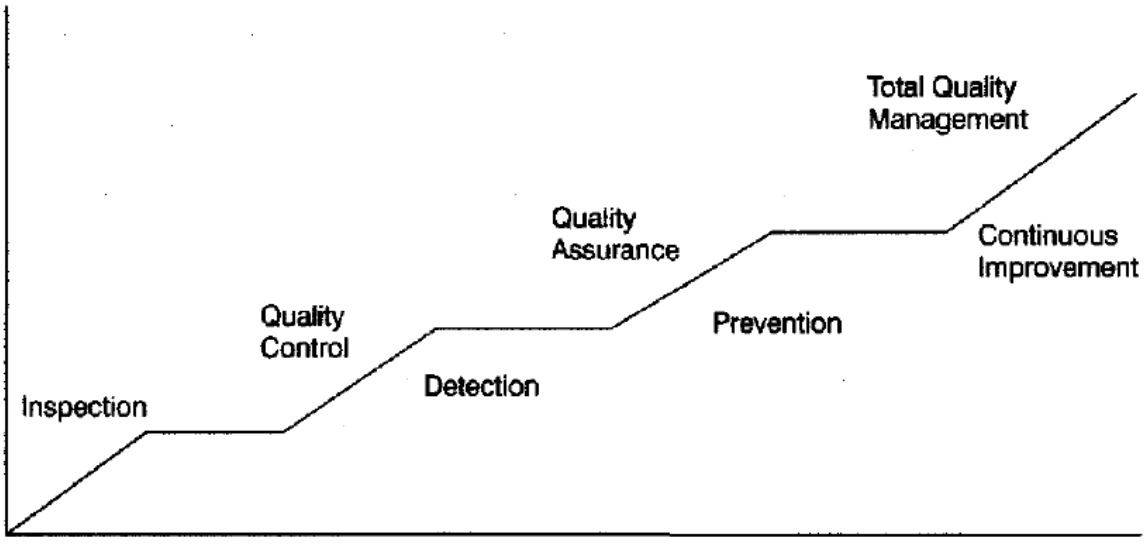

Figure 2.1. The hierarchy of quality concepts. Source: Sallis (2002:17)

Quality control is carried out by inspectors or quality controllers (Sallis, 2002:17). Doherty (2012:75) states that when quality improvement commences within an organisation, it starts with inspection. Quality control is thus seen as a reactive approach which identifies non-

compliance (Doherty, 2012:75). However, in terms of outcomes, the damage has already occurred (Doherty, 2012:75). In education, in order to determine whether standards are met, inspection (commonly known as moderation) and testing are methods of quality control (Sallis, 2002:17).

This implies that quality assurance is different from quality control (Sallis, 2002:17). According to Sallis (2002:17), quality control is a process that takes place before and during an event in order to prevent errors or faults from occurring in the first place. It is a proactive approach (Doherty, 2012:75). Quality assurance ensures that the product, service or institution will meet the required standard in order to maintain the desired quality (Kecetep & Ozkan 2014:661). Kecetep and Ozkan (2014:661) *define quality assurance as a process which consists of a number of steps in order to provide good quality. Yet Luckett (2006:14) maintains her M&E perspective on quality assurance and defines it as both "the internal and external managerial procedures as well as mechanisms by which an institution assures its stakeholders of its quality system, procedures, process, products and outcomes and of its ability to manage the maintenance and enhancement of quality." The purpose of quality assurance is to produce products with 'zero-defects'* (Sallis, 2002:17). Ultimately, it is about getting things right the first time and every time (Sallis, 2002:17). A product's or service's quality is assured by having a system in place, also known as a quality assurance (QA) system (Sallis, 2002:17). This system states exactly how production should take place and according to what standard (Sallis, 2002:17). The QA system establishes the procedures which need to be maintained so that the quality standards are upheld (Sallis, 2002:17). The workforce is responsible for quality assurance, ultimately in quality teams (Sallis, 2002:17) or a designated department. However, according to Doherty (2012:75), quality control together with QA can at times be implemented from the top down. Ultimately, these are managerial strategies aimed at cost-cutting, improving processes and bringing in profit (Doherty, 2012:75).

Finally, total quality management (TQM) includes quality assurance, and expands as well as develops it (Sallis, 2002:17). According to Milosan (2011:43), TQM is an institutional strategy built on the idea that performance in achieving a quality education is only accomplished through the involvement and perseverance of the entire institution (Milosan, 2011:43). TQM creates a quality culture where the objective of every staff member is to please their customers, and where the organisational structure allows them to do so (Sallis, 2002:17). As such, the word 'total' in TQM prescribes that everyone and everything in the organisation is involved in the enterprise of continuous improvement (Sallis, 2002:24). The 'management' in TQM also takes into account everyone, because everyone in the institution, regardless of their position or role, is the manager of their own responsibilities (Sallis, 2002:17). Therefore, TQM is an approach to quality improvement (Salder, 2013:291) and is a holistic management system which requires a

system-wide quality culture in which everyone within the organisational hierarchy, from the bottom up, is accountable for their contribution to the whole: hence 'total' (Doherty, 2012:89). Furthermore, this approach uses strategies, data as well as effective communication so that quality disciplines are integrated into the organisational culture and the organisation's activities (Salder, 2013:291).

TQM was first adopted by Dr W. Edwards Deming during the late fifties. It inspired the industrialists of the East and in due course was embraced by the West (Doherty, 2012:89). Currently, it is marketed by many management consultants (Doherty, 2012:89). According to Doherty (2012:89), TQM spreads beyond QA, as its supporting philosophy is grounded on a passionate belief in a positive attitude to human nature. Ultimately, Deming calls for radical change not only in management and leadership styles, but in government attitudes and policies as well, particularly in education (Doherty, 2012:89).

It might be though that TQM would be attractive to academics in the light of its positive, optimistic view of human nature, and having an organisational hierarchy that is transparent with easy communications up and down the structure, as well as commitment to the vision, mission as well as shared values of the organisation (Doherty, 2012:89). According to Doherty (2012:89), to some degree this is correct, which he proves through examining journals that are devoted to quality within education; however, in the United Kingdom TQM journals are predominantly concerned with higher education as well as further education. Evidently, the university approach is deeply rooted in the philosophy of TQM (Alderman, 1996:53). This is because of the holistic approach which TQM represents. Alderman (1996:54) continues by providing a definition of TQM and stresses that everyone in the organisation plays a crucial role when it comes to quality.

Surprisingly, however, the impact of TQM development in further education is greater and has become more extensive than TQM in higher education (Doherty, 2012:90). According to Doherty (2012:90), the development of a strong coherent QA process is promoted by the European Union for vocational education across its member states through its QA body, the European Quality Assurance in Vocational and Educational Training (EQAVET).

Within South African workplaces the HRD functions according to the national requirements for quality outcomes-based training (Coetzee & Botha, 2013:518). According to Coetzee and Botha (2013:518), quality assurance is recognised as an official warrant of excellence. The shift towards Quality Management Systems (QMS) approach was motivated by:

- Stakeholders (specifically government) who have required a higher level of quality in occupational learning, especially where the learner as well as the employer are invested in the learning opportunities;
- International expectations that each country will ensure the quality of its learners;
- Training and development providers who demand flexibility, needing self-approval together with a review of new learning programmes;
- A shift away from an expensive and centralised system that is unresponsive; and
- Standards and qualifications (Coetzee & Botha, 2013:518).

South African training institutions that want to use the National Qualification Framework (NQF) to its best advantage are required to develop their own training and development QMS (Coetzee & Botha, 2013:519). Saadon, Mustafa & Nor (2014:53), stress the importance of QMS and state that it is vital in any organisation, whether in industry or education. This approach is implemented in the same way as international trends which focus on self-management and delegate the responsibility of ensuring quality; hence, everyone within the institution is responsible for quality (Coetzee & Botha, 2013:519). Also, quality management is vital to every other qualification framework worldwide (Coetzee & Botha, 2013:519). However, Vorwerk (2010:5) argues that focusing exclusively on quality assurance is misleading, if it is not entrenched within a broader quality management approach. In accordance with the organisation's overall strategy, quality assurance of occupational learning programmes guarantees the predictability as well as the repeatability of processes under the control of the organisation against the strategic criteria in the QMS (Vorwerk, 2010: 5).

The previous sections of this chapter indicated the genesis as well as the basis of quality, quality assurance, quality audit and quality control within education, which filters through to vocational and occupational education. Yet, components within these tools of quality provide evidence that the practice of QA relates to M&E, a claim that the next section explores.

2.7. QUALITY ASSURANCE ENCOMPASSING MONITORING AND EVALUATION

Quality assurance is no longer a buzzword, and therefore the literature on QA is no longer the most relevant. However, the concept of QA has become incorporated in the wider term Monitoring and Evaluation (M&E). QA encompasses properties and characteristics of M&E in the definition, purpose as well as components of QA. According to Vroeijenstijn (1995: xiii), quality assurance was still labelled as 'evaluation', trying to determine bottlenecks and weak spots and trying to find better solutions for dealing with them. However, the focus on quality was intrinsic and inward-orientated (Vroeijenstijn, 1995: xiii).

Rabie and Goldman (2014:2) see monitoring and evaluation as management activities that are essential to ensure policy goals are achieved in the form of tangible results. Furthermore, for

the purpose of improving the quality of outputs and outcomes, systematic planning, design and implementation will be of no benefit if one is unable to assess whether the planned target has been reached, whether it was missed, by what margin it was missed, and why (Rabie & Goldman, 2014:2).

Kusek and Rist (2004:13) point out that monitoring and evaluation are distinct yet complementary. Monitoring provides information about *where* a project is at any given time relative to targets and outcomes, while evaluation provides evidence as to *why targets* and outcomes are not being accomplished (Kusek & Rist, 2004:13). Evaluation is defined as "the systematic assessment of the operation as well as the outcomes of a program or project, compared to a set of explicit or implicit standards, as a medium of contributing to the improvement of the program or project" (Weiss, 1998: 3). Monitoring is defined as the continuous assessment of a project or programme operation during the implementation phase in order to assess whether activities have been delivered as intended in the project's or programme's plan, whether the project is reaching the intended target group, and whether the resources are being used appropriately (Weiss, 1998: 333).

Kusek and Rist (2004:228) define quality assurance as:

> *encompassing any activity that is concerned with assessing and improving the merit or worth of a development intervention or its compliance with given standards*.

Luckett (2006:14) defines quality assurance as:

> *the internal and external managerial procedures as well as mechanisms by which an institution assures its stakeholders of its quality system, procedures, process, products and outcomes and of its ability to manage the maintenance and enhancement of quality.*

Lastly, Vroeijenstijn (1995: xviii) describes quality assurance as the "*systematic, structured and continuous attention to quality in terms of quality maintenance and quality improvement."*

These definitions of quality assurance are provided from an M&E perspective in comparison to Sallis's or Kecetep and Ozkan's definition of quality assurance. These definitions are similar to the definition of both monitoring and evaluation, as they encompass key descriptors of monitoring and evaluation such as *systematic, continuous, assessing, improving* and *outcomes*. SAQA (2000:7) also maintains that quality assurance is a continuous process. Therefore, QA is incorporated into monitoring and evaluation.

The similarities of monitoring and evaluation are found in the mechanisms and the properties of QA. The first mechanism of QA is quality control. Sallis (2002:16) and Green (1994:13) have established that quality is an evaluation process which takes place after the output has

been produced. Thus, it is retrospective. Quality assurance, on the other hand, takes place before and after production; therefore, quality assurance is a continuous process and ultimately incorporates aspects of monitoring. According to Gorgens and Kusek (2009:429), quality assurance is required in all steps of monitoring and evaluation.

Given these similarities and the broad context of M&E, it is evident that QA will remain a tool or mechanism of M&E, as they have become management tools which will assists occupational learning institutions in achieving their organisational goals as well as the project goals. However, quality assurance remains "trapped" in the traditional implementation-based tool of monitoring and evaluation (Kusek & Rist, 2004:61), ultimately, neglecting the end result, i.e. the impact.

2.8. THE USE OF IMPACT EVALUATION AND THE LOGIC MODEL IN QUALITY ASSURANCE

The last twenty years have seen the development of a large variety of procedures and instruments of QA within education (Leiber, Stensaker, & Harvey, 2015:288). Yet the question remains whether QA is leading to improvement (Newton, 2012:8)? According to Sallis (2002:25), constant innovation, improvement and change are emphasised and the institutions that implement them lock into a cycle of continuous improvement. But Newton (2012:8), argues that at times it is easily assumed that QA does lead to enhancement, or that enhancement leads to improvement. Regardless of this, significant emphasis has been placed on the development of competencies and qualifications together with a substantial amount of both private and public investment, therefore making it necessary to know the impact of actions (ILO, 2011:25). Ultimately, shifting from the traditional implementation-based tool, i.e. inputs, activities/process and outputs, of monitoring and evaluation (Kusek & Rist, 2004:61) towards the logical model of "outcomes" or "impacts" would be beneficial to institutions.

Vedung (2000:4) argue that evaluation can be seen as systems thinking, as illustrated in Figure 2.2. He defines a system as a whole in which the component parts are reliant upon each other. As a result, a system, in its most basic form, consists of input, conversion and output (Vedung, 2000: 4).

Figure 2.2. Vedung's (2000:4) Simple Systems Model.

According to Weiss (1998), inputs are defined as the resources that are used to conduct a programme. Conversion refers to the activities that are undertaken within the programme that lead to or supports the outputs (Rabie & Cloete, 2011: 206). Outputs refer to the results of the activity (Rabie & Cloete, 2011: 205). Thus, according to Kusek and Rist (2004:61), inputs, conversion (activities) and outputs serves as implementers in order to achieve the desired result. Kusek and Rist (2004:61) state that inputs, activities (conversion) and outputs are seen as the traditional implementation-based tools for evaluation. Consequently, SAQA (2002:13) still describes QA in this regard, as illustrated in Figure 2.3.

Figure 2.3. An adaptation of SAQA's quality process. Source: SAQA (2002:13)

Institutional managers would bring together inputs, assign activities and patiently wait for outputs (Kusek & Rist, 2004: 61). However, the weakness of this approach is that carrying out all of the activities and outputs is not the same thing as attaining the desired outcomes (Kusek & Rist, 2004: 61). According to Kusek and Rist (2004:61), the total of all activities may or may not imply that the desired outcomes have results. Thus, it is argued that even if all the activities were accomplished within the specified timeframe, the desired outcomes have not necessarily been accomplished. This therefore increases the need for impact evaluation. According to DHET (2010 and 2015:8), the process of monitoring and evaluation incorporates the processes of design and development, the implementation of occupational learning programmes as well as impact evaluation (assessment).

Impact evaluation is traditionally defined as assessing the net effects of a programme, namely the effects other than irrelevant factors or design effects that can reasonably be characterised by the programme (Mouton, 2014:180). Similarly, Leiber (2014:45-48) states that any impact evaluation should measure actual effects (that is outputs, outcomes and impacts) of some interventions (the causes) to which the dynamic system is exposed. According to Kusek and Rist (2004:125), impact evaluation tries to determine what portion of the impacts were a result of the intervention, and what might have come from other events. However, Leiber *et al.* (2015:292) argue that the biggest challenge to impact evaluation of QA within higher education institutions, in terms of casual social mechanisms, is the absolute complexity of the problem,

as QA interventions have complex aspects and a number of cross-effects on different sub-systems within higher education. Yet, these QA interventions have different aims and purposes and compete with other causes (Leiber *et al*., 2015:292). As a result, unintended as well as undesirable effects and long-term impacts may occur (Leiber *et al*., 2015:292).

The approach which is promoted in order to understand why a programme has, or has not, had an impact is referred to as theory-based impact evaluation (White, 2009:3). This approach entails probing the assumptions that underlie the chain from inputs to outcomes and impacts (White, 2009:3). Not only does this approach determine a programme's effectiveness, but impact evaluation assists with monitoring and evaluating performance. As such, DHET has developed the *Monitoring and Evaluation and Reporting Framework for Technical and Vocational Education and Training College Performance* Policy to monitor and evaluate TVET performance by making use of the logic model. Mouton (2014:178), states that the logic model reconstructs the casual chain and makes clear the connections between the programme objectives, activities and expected outcomes. Accordingly, the short-, medium- and long-term outcomes are tracked for the client's satisfaction and for the institution's benefit (determining efficiency and effectiveness) (Leahy, Thielsen, Millington, Austin, & Fleming, 2009:71). This type of evaluation has shifted the focus from compliance towards continuous improvement as continuous improvement requires well-defined and guaranteed objective measures (Leahy, *et al*., 2009:71).

2.9. SUMMARY

It is evident that skills development in South Africa, specifically in terms of the OLS, is the country's solution to its skills shortages, economic discrepancies and, to some extent, even to combating poverty. But the critical limitation to the improvement of the OLS is its qualitative output: whether it is defining the concept of quality according to the current circumstances the institution is experiencing or the application of quality purposes. The literature review has stressed aligning M&E tools with QA, or vice versa, as these two mechanisms share similar traits in its practice.

The next chapter reviews OLS models from three different countries, two of which have similar skills limitations as South Africa, while the other model is seen as a more advanced first-world VET system. It is important to note that these models are referred to as *VET* systems or by their designated name. Regardless, the system is the same as the OLS. This chapter is intended to provide a benchmark for South Africa's OLS.

CHAPTER 3

COMPARATIVE INTERNATIONAL EXPERIENCES

3.1. INTRODUCTION

The field of vocational educations is well established, expansive and diverse in the way it is manifested across countries, and at times within them (Billet, 2008:2). What's more, it consists of highly developed independent vocational education systems in a number of countries such as Norway, Germany, Switzerland, Bangladesh and Singapore, to name a few (Billet, 2008:2). Idialu and Alli (2013:431) describe vocational learning as an aspect of education that is concerned with training and preparing people for qualified skilled performance. This type of education equips the learner for economic independence and self-actualization together with being productive in various fields of learning (Idialu & Alli, 2013:431). The achievement of quality standards within vocational education is a continuous process that is concerned with pre- and post-training education, monitoring, occupational development and certification (Idialu & Alli, 2013:431).

There are a number of well-established systems of vocational education internationally. There is documented evidence of vocational education from the following countries: Singapore, Bangladesh and Switzerland. This evidence is summarized below to identify common practices of QA by analysing, comparing and contrasting their educational frameworks and their components. These practices are established as a benchmark against which to compare South African practices.

3.2. NATIONAL TRAINING AND VOCATIONAL QUALIFICATIONS FRAMEWORK (NTVQF): BANGLADESH

The Bangladesh Skills Development System consists of two components; the first is the National Training and Vocational Qualifications Framework (NTVQF) and the second is the National Skills Quality Assessment System (NTVQF, 2015:1). Together, these systems ensure quality and demand-based skills development in Bangladesh (NTVQF, 2015:1). The NTVQF was developed in response to numerous challenges, among them the lack of support available between institutions and industry; furthermore, quality is not consistent (Government of Bangladesh, 2015:2). Bangladesh's skills development system consists of public, private, NGO as well as industry-based training institutions which provide a vast number of training programmes to different target groups (Government of Bangladesh, 2015:12).

The NTVQF is a comprehensive, nationally integrated yet flexible framework for qualifications in technical and vocational education and training, and is comprised of eight qualification levels, as illustrated in Table 3.1.

Table 3.1. The levels of the NTVQF. Source: Government of Bangladesh, 2015:12.

Level	Description
Level 6	**Supervisor/Middle-Level Manager** Manages a team or teams in a workplace where there are unpredictable changes
Level 5	**Highly Skilled Worker** Takes overall responsibility for completion of tasks in work or study
Level 4	**Skilled Worker** Takes responsibility, within reason, for completion of tasks in work or study
Level 3	**Semi-Skilled Worker** Works with some autonomy under supervision
Level 2	**Medium-Skilled Worker** Works under indirect supervision in a structured context
Level 1	**Basic-Skilled Worker** Works under direct supervision in a structured context
Pre-Voc Level 2	**Pre-Vocation Trainee** Works under direct supervision in a well-defined, structured context
Pre-Voc Level 1	**Pre-Vocation Trainee** Simple work under direct supervision in a well-defined, structured context

The implementation of the NTVQF required three fundamental components in order for it work and they form the basis of the framework:

- The first was *nationally-recognised competency standards:*

  A set of industry-determined knowledge, skills and attitudes that have been nationally agreed upon. This set of standards is required for workers in order to effectively perform work activities to the expected standard within the workplace (Government of Bangladesh, 2015:13);

- The second component was a *competency-based training (CBT) delivery system:*

  This system is used by trainers to develop learners' competency in necessary learning areas. Instead of focusing on the development of theoretical knowledge, as in Bangladesh's traditional education system, CTB places great emphasis on real-work skills that an individual can apply in the workplace (Government of Bangladesh, 2015:13);

- The final component was the *National Competency Assessment and Certification System (NCACS):*

  This system ensures a nationally integrated approach to assessing whether trainees are competent in the learning area. The first component (nationally-recognised competency standards) is seen as a measuring tool and the second component (CBT) is the method used

in delivering the training. The NCACS relies on certified assessors, assessment facilities and equipment, assessment tools as well as the NTVQF information system (Government of Bangladesh, 2015:13).

According to the Government of Bangladesh (2015:30), there was no integrated approach to quality assurance in Bangladesh's previous technical vocational education and training system. This led to difficulties with the quality of graduates along with the relevance of their skills as well as the range and scope of training programmes that were delivered (Government of Bangladesh, 2015:30). The National Skills Quality Assurance System (NSQAS) defines quality as being present "when a product or a service meets the needs of its client" (Government of Bangladesh, 2015:31). Quality is not measured by the size of an organisation's buildings, but instead the quality standard is the consistency of achievement of the required competence by graduates (Government of Bangladesh, 2015:31). The NSQAS has been design in such a way that it promotes continuous improvement. This is because the skills, attitudes and knowledge are not fixed and will inevitably change over time (Government of Bangladesh, 2015:31).

The NSQAS is a comprehensive system that brings together and assures the quality of all the components that produce individuals who are competent in the nationally recognised skills (Government of Bangladesh, 2015:31). The NSQAS includes the following components in its QA process:

I. The accreditation of competencies that are nationally recognised, qualifications and specified programmes;
II. Public and private training provider registrations;
III. Accreditation of learning and assessment programmes;
IV. Compliance audits of training providers against the quality standard; and
V. Validating assessment tools against the units of competency (Government of Bangladesh, 2015:31).

3.3. SINGAPORE'S CONTINUING EDUCATION AND TRAINING (CET) QUALIFICATIONS FRAMEWORK: THE WORKFORCE SKILLS QUALIFICATION SYSTEM

Workforce education and development in Singapore consists of two main components: the Pre-employment Education and Training (PET) and the Continuing Education and Training (CET), as illustrated in Figure 3.1. (Singapore Workforce Development Agency, 2011:1). The PET is supported by a robust education system which starts with early childhood education and leads to university education (Singapore Workforce Development Agency, 2011:1). Essentially, this system is designed for children and young adults and ensures that they are equipped with a broad-based education and prepares them for adulthood and also the workforce (Singapore

Workforce Development Agency, 2011:1).

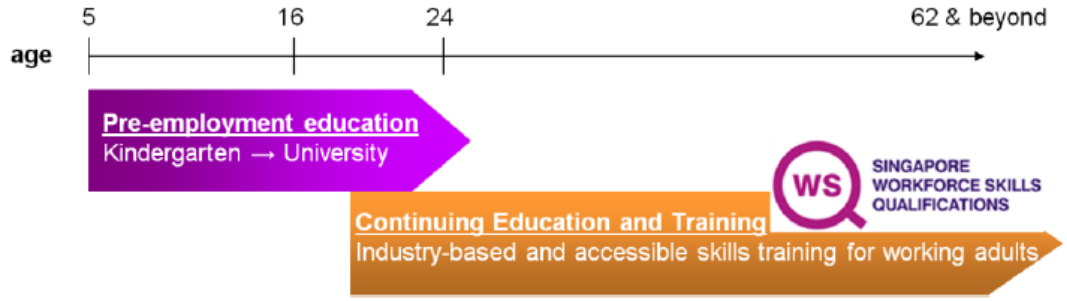

Figure 3.1. Singapore's Education System. Source: Singapore Workforce Development Agency, 2011:1

On the other hand, the CET system has been delivered in such a way that it is more diverse; it is designed for all adults and all individuals who form part of the workforce (Singapore Workforce Development Agency, 2011:1). The overarching aim of this system is to equip the workforce with the necessary competencies in order to ensure that they remain employable, that industries benefit from enhanced work performance because there is a supply of skilled workers, and ultimately it contributes to economic growth in Singapore (Singapore Workforce Development Agency, 2011:1). The main CET system that has been developed is the Singapore Workforce Skills Qualifications (WSQ), which provides training and education for all the levels of the workforce (Singapore Workforce Development Agency, 2011:1). It is a well-integrated system of continuing education (Skills Future SG, 2016:5).

In comparison to the NTVQF, the WSQ is designed on the basis of four key principles (Singapore Workforce Development Agency, 2011:4). The first and most important principle is relevance; the occupational and competency system is designed in such a way that it is continually up to date with the needs and capabilities of industries (Singapore Workforce Development Agency, 2011:4). The second principle is authority; the recognition of credentials, qualifications and certification by industry is awarded by the Workforce Development Agency (WDA) as well as the awarding bodies that have been established (Singapore Workforce Development Agency, 2011:4). The third principle is accessibility; through the design of modular and flexible programmes, individuals acquire new skills and knowledge, which results in the awarding of the Statements of Attainment or full qualifications (Singapore Workforce Development Agency, 2011:4). The final principle is progression; because of the different types as well as levels of qualifications, progression allows the individual to continuously re-skill and upgrade to different qualifications (Singapore Workforce Development Agency, 2011:4).

Based on the abovementioned principles, the WSQ was designed as a competency-based qualifications system that prepares workers with foundational and cross-cutting competencies together with deep industry competencies and occupational competencies (Singapore

Workforce Development Agency, 2011:4). The framework is comprised of singular as well as flexible training modules; assessment and certification are based on demonstrating the required industry capabilities; it is accessible to all workforce employees as well as professionals; this

Figure 3.2. The qualification levels in the WSQ. Source: (Singapore Workforce Development Agency, 2011:1)

framework also recognises prior learning as well as work experience; the qualifications are based on industry standards; and the system has six occupationally-based qualifications, as illustrated in Figure 3.2. (Singapore Workforce Development Agency, 2011:5).

According to Skills Future SG (2016:6), QA is the backbone of the WSQ. A robust QA framework is vital in order to ensure public confidence in the WSQ (Skills Future SG, 2016:6). As a result, the quality of the WSQ's training programmes and assessments are assured through its accreditation process (Singapore Workforce Development Agency, 2011:10). Although the QA framework has evolved and been refined since its development, in essence it focuses on the following elements:

- Approval of WSQ training providers;
- Course accreditation;
- The establishment of benchmark standards for trainers, assessors and curriculum designers;
- Continuous Improvement Reviews (CIRs) of training providers (Singapore Workforce Development Agency, 2011:10-11), so that the standard of delivery in training and assessment is maintained (Skills Future SG, 2016:6).

The WSQ quality assurance framework consists of pre-accreditation and continuous accreditation mechanisms which are aimed at ensuring quality as well as reliability, and it recognises WSQ programmes, credentials and its qualifications (Singapore Workforce Development Agency, 2011:11). At the pre-accreditation stage the prospective training providers are subjected to screenings of their organisational status as well as their track record; their processes and systems, which ensures quality of programme design and delivery; their

assessment materials as well as curriculum; and the credentials of personnel, which includes trainers, management and curriculum designers (Singapore Workforce Development Agency, 2011:11). Once the training providers have been WSQ accredited, they become subjected to yearly audit reviews that focus on four key areas: i.e. "internal quality assurance system of programme design; development and delivery; adult educator management; outcome evaluation system; and administrative system" in order to determine whether they can continue as a training provider with a WSQ status (Singapore Workforce Development Agency, 2011:11).

3.4. THE SWISS VOCATIONAL EDUCATION AND TRAINING (VET) SYSTEM

Similar to Bangladesh and Singapore, the Swiss VET system plays a vital role in keeping the country's workforce dynamic, professional and market responsive (Research Office Legislative Council Secretariat, 2014:1). In Germany, Austria, Denmark and Norway between 30 to 70 percent of learners participate in the dual … (Hoffman & Schwartz, 2015:1). According to Hoffman and Schwartz (2015:1), the Swiss VET system is perhaps the strongest in Europe. One important aspect of Swiss education is that compulsory education ends at Grade 9, which is "lower secondary school", which makes this a very strong educational system (Hoffman & Schwartz, 2015:5). It is believed that the compulsory education provides children with a concrete foundation of core academic skills for the next educational path they choose (Hoffman & Schwartz, 2015:5).

In Switzerland graduates have an option of choosing between two major educational pathways with regards to furthering their studies (Research Office Legislative Council Secretariat, 2014:1; Hoffman & Schwartz, 2015:6). The first is academic baccalaureate education and the second is dual-track VET programmes, which integrate workplace training with classroom theory (Research Office Legislative Council Secretariat, 2014:1). The majority (that is two thirds) of adolescents favour the VET stream over the academic stream (Research Office Legislative Council Secretariat, 2014:1; Swiss Education, 2017).

The Swiss VET system allows learners to choose from among 240 different occupations, ranging from traditional crafts to insurance (Hoffman & Schwartz, 2015:6). According to Hoffman and Schwartz (2015:6), this system is particularly attractive to a number of young people because of four features:

- It immediately puts young people in an adult environment where they are treated differently compared to schooling. The learners have more responsibility and are given a great deal of support and coaching;
- Within this system the learning is "more hands-on, contextualised and applied." As such, the academic concepts are put to practice;

- Learners earn an income while they are learning, with a salary increase every year (Research Office Legislative Council Secretariat, 2014:3); and,
- Once the apprenticeship is complete, the learners are recognised with a national qualification that is transferable and provides them with an opportunity for full-time employment or to continue their education.

Within the Swiss VET system learners are required to serve as apprentices in their assigned companies and learn the trade practice over a period of three to four days each week (Research Office Legislative Council Secretariat, 2014:1; Swiss Education, 2017). The remaining one or two day(s) per week, the learners are required to study vocational theory (Research Office Legislative Council Secretariat, 2014:1; Swiss Education, 2017). What's more, VET learners are also required to attend inter-company courses where they learn to enhance their practical skills (Swiss Education, 2017). These apprenticeships typically last for three to four years, and trainees are awarded federal diplomas once they have passed the federal exam, as illustrated in Figure 3.3. (Research Office Legislative Council Secretariat, 2014:1). There are also shorter certificate programmes that run for two years (Research Office Legislative Council Secretariat, 2014:1).

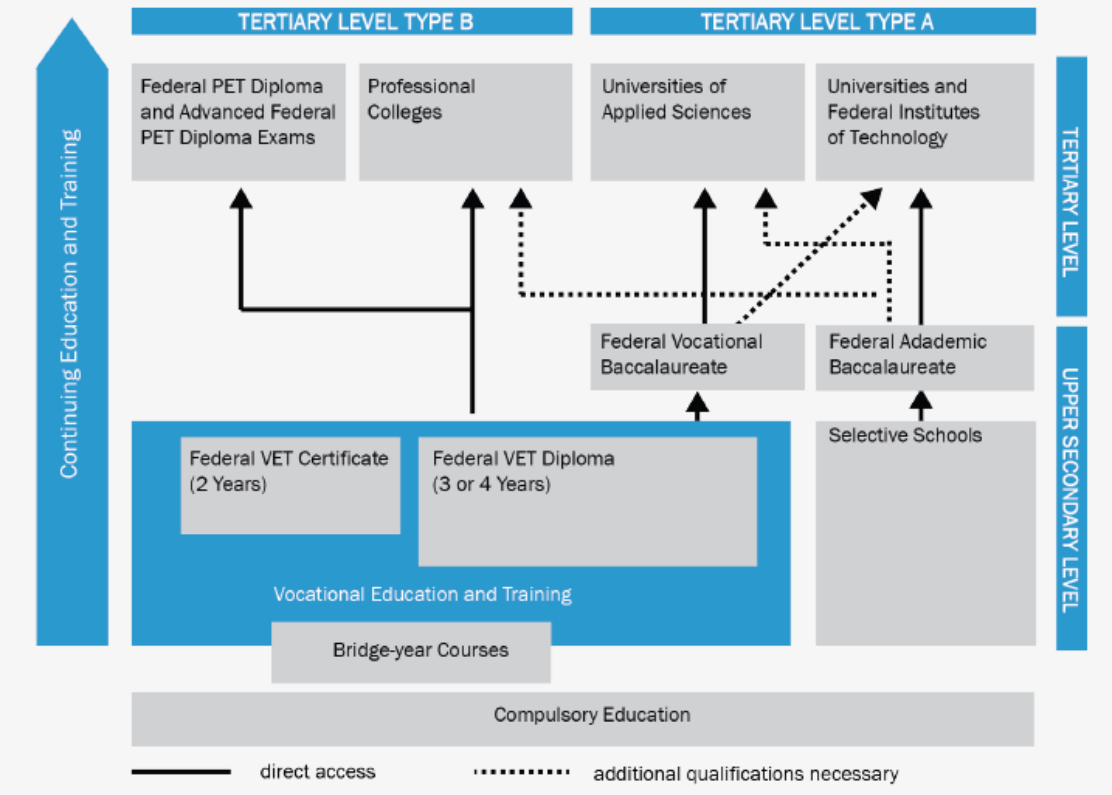

Figure 3.3. The Swiss Education System. Source: (Hoffman & Schwartz, 2015:7)

The Swiss VET system is seen as one mission and collectively governed by three partners: (i) the government; (ii) the states; and (iii) the professional organisations; this is seen as a tripartite

venture (Hoffman & Schwartz, 2015:9; Research Office Legislative Council Secretariat, 2014:4). The professional standards of the VET system are maintained by the stakeholders, who work closely together, so that an adequate supply of apprenticeship positions is available for the youth (Research Office Legislative Council Secretariat, 2014:4). In particular, the State Secretariat for Education and Innovation of the Federal Government, the closest establishment Switzerland has to a Ministry of Education (Hoffman & Schwartz, 2015:9), is responsible for regulating and co-funding the VET system (Research Office Legislative Council Secretariat, 2014:4). At the same time, the 26 state VET offices are assigned with the task supervising and coordinating the VET system at a regional level as well as managing the marketing (Research Office Legislative Council Secretariat, 2014:4). The professional organisations together with the companies are the implementation agencies, which are responsible for the design of training material along with providing apprenticeships and conducting the examination process (Research Office Legislative Council Secretariat, 2014:4).

Given the responsibilities of these stakeholders, QA within the Swiss VET system is governed by the European Quality Assurance Reference Framework (EQAVET) (Europa, 2017). This framework is a reference tool designed to assist EU countries in promoting and monitoring the continuous improvement of their VET systems on the basis of commonly agreed references (Europa, 2017). Not only does the framework contribute to quality improvement in VET, but it also builds shared trust amongst these VET systems. The framework also makes it easier for a country to accept and recognise the skills and competencies acquired by learners from different countries and learning settings through its VET credit system (Europa, 2017). The QA framework is designed in such a way that it involves all the relevant stakeholders and EU countries utilise it in order to improve their QA system (Europa, 2017). This involves:

- Establishing national reference points for QA;
- Actively taking part in the relevant European-level network; and
- Creating a national approach which is aimed at improving QA systems and using the framework in the best possible way (Europa, 2017).

3.5. SUMMARY

It is evident that each of the above-mentioned VET frameworks, yet each has similar components. All three frameworks are characterised by two components, i.e. the VET framework and the QA framework which governs it; each VET framework has distinct qualification levels for the learning process; all three countries place a strong emphasis on having good relations between the training institutions and places of work; the overarching aim of these frameworks is to improve the country's economy and also to add to the skill set of its citizens. These systems are developed in such a way that it allows learners easy access through

the system based on the recognition of skills and competencies. In terms of QA, the Bangladeshi and Singaporean QA frameworks are fairly similar as both are based on competency standards; accreditation of qualifications, learning programmes and assessment; and the registration of public and private training providers. In contrast, Bangladesh uses compliance audits and the validation of assessment tools, while Singapore and Switzerland make use of continuous improvement mechanisms to conduct their QA process. One essential aspect that each QA framework has is the close cooperation with the specific stakeholders and the absence of numerous statutory bodies that may influence these systems in terms of contrasting legislative criteria.

These occupational and QA frameworks provide a benchmark for South Africa's complex OLS, described in Chapter 4. South Africa's system has similar components to all three frameworks. The next chapter will provide an overview of the legislation, policies and bodies that govern and influence the South African OLS and evaluate what has transpired over the years to determine the current framework for QA in South Africa's vocational training institutions.

CHAPTER 4

POLICIES AND LEGISLATION WHICH UNDERPIN OCCUPATIONAL LEARNING AND QUALITY ASSURANCE IN SOUTH AFRICA

4.1. INTRODUCTION

Since the rise of democracy in 1994, South Africa can be thought of as a young adult – an adult who has overcome its terrible two's, the teenage years, who now knows right from wrong, and has matured as an adult through the guidance of legislative and policy frameworks: its "parents" or "guardian". Whilst South Africa is still growing democratically, so too is occupational learning. This new learning system has been comprised by old and new legislations and policies, along with having to account to various statutory bodies. These policies and pieces of legislation offer opportunities for enhancing skills and bridging the skills gap in South Africa. This chapter aims to provide a timeline of skills development policies and legislation, and includes other relevant legislation which influences skills development and the OLS, especially within the HRD sector. This chapter also seeks to identify the statutory bodies that influence quality assurance within skills development.

4.2. THE LEGISLATIVE UNDERPINNINGS OF SOUTH AFRICA'S OLS

The building blocks of educational legislation are enshrined in the Constitution of the Republic of South Africa (1996). The Bill of Rights states that everyone has the right to basic education as well as adult education, and to further education, which the state must make gradually available and also accessible (Republic of South Africa, 1996:14). Subsection (3) states that everyone has the right to create and maintain, at their own expense, independent educational institutions that maintain standards that are not inferior to the standards similar to those of public educational institutions (Republic of South Africa, 1996:14). On this basis, all forms of education have become prioritised and to some extent accessible.

South Africa's skills development framework has a dynamic history and some of its recent complexities are assumed to have their roots in its creation (Tshilongamulenzhe & Coetzee, 2013:14). This framework arose out of a process of organised labour, educationalists and other stakeholders who developed their own vision for skills development and education and training, and through working in the direction of what seemed to be a single vision. Yet this process retained the legacy of competing imperatives and expectations (Tshilongamulenzhe & Coetzee, 2013:14). Marock (2010:7) adds that the skills system is characterised by a high level of fragmentation, which has proven to be challenging to monitor and led to a great deal of inefficiency. Furthermore, the poor quality of general education, the low relevance of publicly funded training and low-level investment from companies are all factors that contributed to

South Africa having a poor skills profile in the past (Haasbroek, 2004:413). Yet these same issues continue to impose limitations on the skills development system (Marock 2010:5). However, Balwanz (2014:21) maintains that although there has been an increase in post-school enrolments, youth unemployment continues to increase. The excess of training qualifications as well as market pathways that were accessible make it more difficult for learners to judge the credibility as well as market value of a training programme, and it also makes it difficult for companies to determine the value of the qualifications obtained by employees (Haasbroek, 2004:415; Warnich *et al*., 2015:341).

This problem was addressed by the SAQA Act 1996, as it provided a regulatory framework for an all-inclusive national recognition framework, which consisted of national standards to improve the quality as well as an indication of the relevance of the training (Haasbroek, 2004:415).

Since skills development has played such a crucial role in South Africa, over the years the government has passed a number of pieces of legislation in this regard: The South African Qualifications Authority Act, No. 58 of 1995, now replaced by the National Qualifications Act, No. 67 of 2008; the Skills Development Act, No. 97 of 1998, amended by the Skills Development Act, No. 37 of 2008; and the Skills Development Levies Act, No. 9 of 1999 (Warnich *et al*., 2015:341; Gura, 2015:234), along with other Acts which also influence or promote skills development. Figure 4.1. Illustrates a timeline for the introduction of legislative frameworks and policies that influence skills development as well as the OLS. The timeline has been developed in such a way as to show the Acts and their amendments as per the sub-section's. Figure 4.1. depicts the Acts and policies sequentially.

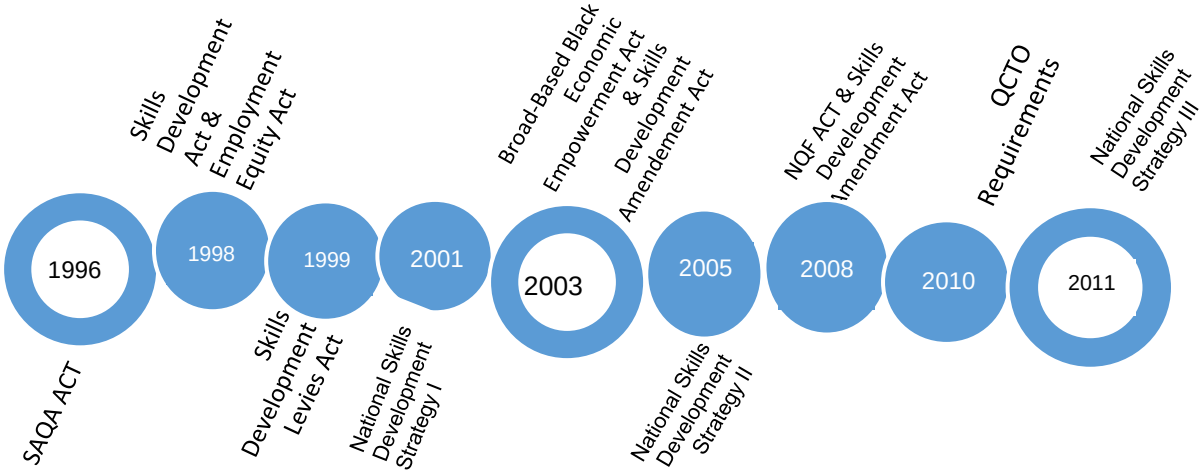

Figure 4.1. A timeline of legislative frameworks and policies which influence skills development as well as the OLS. (Own illustration)

According to Warnich *et al*. (2015:341), these pieces of legislation have had extensive implications for education and for training and development in South Africa. They also support the implementation of the National Skills Development Strategy (NSDS) through informing and assisting various programmes and processes that address the skills challenge (Warnich *et al*., 2015:380).

4.3. THE SOUTH AFRICAN QUALIFICATIONS AUTHORITY (SAQA) ACT AND ITS CRITERIA

SAQA Authority was established in 1996 in order to redress South Africa's past inequalities and to promote credible skills development so that the country's needs are met (le Grange, 2011:16). It was established to replace the "repealed South African Qualifications Authority Act 53 of 1995 and provided for in the National Qualifications Framework Act 67 of 2008" (Tshilongamulenzhe & Coetzee, 2013:59). It is a juristic entity (Tshilongamulenzhe & Coetzee, 2013:59) which is mandated to develop, register and research all learning across South Africa (le Grange, 2011:16). SAQA oversees the development as well as implementation of the National Qualifications Framework (NQF) (Tshilongamulenzhe & Coetzee, 2013:59; Haasbroek, 2004:415) and at national level it develops policy for implementation (le Grange, 2011:16). SAQA's role is to advance the objectives of the NQF, manage the further development of the NQF, and co-ordinate the sub-frameworks of the NQF (RSA, 2010:10)

The NQF served as a vehicle for creating an integrated national framework for learning achievements together with promoting increasing access to quality of the elements in the education and training delivery system (RSA, 1995:2). In addition, SAQA's function involves formulating and publishing the criteria for the registration and accreditation of bodies that are responsible for establishing education and training standards or qualifications (Lead the Field, 2017). Initially, SAQA was accountable to both the Minsters of Education and Labour (Lead the Field, 2017). It was accountable to the Department of Labour due to market influences together with the involvement of companies. However, after the political changes of 2009, SAQA is now accountable only to the Minister of Education and Training (RSA, 2010:10). What's more, it is obligated to comply with the numerous rights and powers of bodies aligned to the Constitution and Acts of Parliament (Tshilongamulenzhe & Coetzee, 2013:60).

The National Standards Bodies Regulations were published in 1998 by SAQA, which made provision for the registration of National Standards Bodies (NSBs) as well as Standards Generating bodies (SGBs) (Erasmus, Loedolf, Mda & Nel, 2009:74; Tshilongamulenzhe & Coetzee, 2013:60; Lead the Field, 2017). These bodies were responsible for producing standards and qualifications (Lead the Field, 2017). These standards and qualifications were recommended to the Standards Setting Directorate (Tshilongamulenzhe & Coetzee, 2013:60).

However, in 2005 these two bodies were abolished, and their qualification role was taken over by Consultative Panels of Experts, who were specially convened (Tshilongamulenzhe & Coetzee, 2013:60). According to Tshilongamulenzhe and Coetzee (2013:60), the Consultative Panels consisted of subject matter experts and also qualification experts, and their duty was to evaluate qualifications and standards in terms of the sector for which the qualification had been developed by using the SAQA criteria. They too were disestablished and have been replaced by Committees of Expert Practices (CEPs) (Tshilongamulenzhe & Coetzee, 2013:60).

With regard to qualifications, the NQF Act 26 of 2008 stipulates that SAQA has the following roles:

1. After consultation with the Quality Councils (QCs), SAQA must develop and implement policy and criteria for the development, registration and publication of qualifications and also part-qualifications, and the following requirements must be included:
    - The relevant sub-framework must be identified on any document that relates to the registration and publication of either the qualification or part-qualifications; and
    - Each sub-framework must have a distinct classification for its qualification types that are appropriate to the relevant sub-frameworks and consistent with international practice;
2. Qualifications or part-qualifications that are recommended by the QCs must be registered by SAQA if the relevant criteria are met;
3. After consulting with the QCs, SAQA must develop policy and criteria for assessment, recognition of prior learning (RPL), credit accumulation and transfer (RSA, 2010:11).

The Education and Training Quality Assurance (ETQA) regulations were also published in 1998 and made provision for the accreditation of ETQA bodies (Tshilongamulenzhe & Coetzee, 2013:60; Lead the Field, 2017). Furthermore, these bodies were assigned the responsibilities of accrediting providers of education and training standards as well as qualifications registered on the NQF, providing monitoring, conducting the evaluation of assessments and exercising moderation across providers and registering assessors.

As per subsection (3) of the Act, the policy documents published by SAQA provided ETQAs and training providers with regulations and requirements in order to assist and guide them with the development of their own institutional policies, particularly in terms of QA. These criteria are briefly summarised below.

4.3.1. Criteria and Guidelines for ETQAS

This document was seen as a manual that was concerned with the development of quality assurance together with the implementation functions of SAQA (SAQA, 2001a:5). The SAQA Act No. 58 of 1995 and the ETQA Bodies regulations provided the enabling and regulatory framework for implementing the quality assurance systems and processes which were required by the NQF (SAQA, 2001a:5). These criteria and guidelines were developed through a stakeholder and public participation process, when they gave their input and conducted a review process, keeping in mind the powers, responsibilities and functions of ETQAs as well as the accreditation bodies (SAQA, 2001a:5). These bodies include:

- Statutory as well as non-statutory QA, Accreditation and Certification bodies for either specific or general forms of education and training; and
- Both public and private institutions or providers of either specific or general forms of education and training (SAQA, 2001a:5).

The actual purpose of these criteria and guidelines was to allow the implementation of SAQA quality assurance and accreditation functions during the transitional phase, while the NQF was being developed (SAQA, 2001a:5).

Given this background, the criteria and guidelines for ETQAs were designed as an explanatory manual for education and training institutions that wish to apply for accreditation under the provisions of the SAQA Act (SAQA, 2001a:6). Their purpose was to permit the ETQA bodies to evaluate the requirements for accreditation and they also outline numerous possibilities for these bodies within the ETQA Regulations (SAQA, 2001a:6). These criteria and guidelines acted as a basis for the development of the comprehensive criteria and guidelines that ETQAs had to put in place so that providers could be evaluated and accredited (SAQA, 2001a:6).

Given this policy guideline, SAQA developed the Criteria and Guidelines for Providers, which is discussed below.

4.3.2. Criteria and Guidelines for Providers

This manual was published immediately after the approval of the ETQAs criteria and guidelines in 1999 (SAQA, 2001b:5). Similar to the ETQA manual, it views the SAQA requirements for providers within the structures and processes that were required for the implementation of QA policies as well as mechanisms for the NQF (SAQA, 2001b:5). This policy document was also placed within the enabling and regulatory framework provided for by SAQA Act 58 of 1995, the ETQA Bodies Regulations as well as the National Standards Bodies Regulations (SAQA, 2001b:5).

The basis for these criteria and guidelines was developed by the enabling framework together with the Criteria and Guidelines for ETQAs (SAQA, 2001b:5). Contributing to this, was the consultation and incorporation of national stakeholder policies and procedures which ensured the quality of learning provision (SAQA, 2001b:5). Once more, in line with the ETQA's Criteria and Guidelines approach, the actual purpose of this document was to enable the implementation of QA and accreditation mechanisms for providers (SAQA, 2001b:5). According to SAQA (2001b:5), this policy document should not be viewed by means of depicting providers as a steady state of QA and accreditation issues; however, it should be seen as an enabling framework for them in a transitional state.

Due to the transformation of the national education and training system, a process approach had to be adopted (SAQA, 2001b:5). It had to be an approach that took into account the requirements for ensuring the quality of learning achievements as well as learning provision. The approach was directed towards implementing the QA process, which was a requirement for the outcomes-based and integrated model for the new education and training system (SAQA, 2001b:5). One key factor in this approach was to ensure that there were incremental quality improvements within the learning system.

Essentially, this document was designed as the principal guide for providers in order for them to evaluate what they need to have in place. This was done to ensure the quality of learning provision and what needs to be validated by the relevant ETQA in order for providers to be accredited as such (SAQA, 2001b:6). It was crucial that this document should not be regarded as the "minimum requirements" for provision. Instead, it provided a guide to quality processes and practices for learning provision and achievement (SAQA, 2001b:6).

Given this policy guideline, SAQA developed the QMS guideline for ETQA, which is discussed below.

4.3.3. Quality Management Systems for ETQA

Since ETQAs were independent bodies, they existed as an integral part of the learning system, which was established so that the NQF could be introduced and implemented (SAQA, 2001:5). Along with the other elements of this system, ETQAs were part of the NQF's QMS (SAQA, 2001:5).

According to SAQA (2001:5), ETQAs were identified in two sectors, namely the education and training sub-system and the economic sector. As such, the ETQA had to manage providers of different sizes as well as organisational cultures, who regularly provided learning for different purposes for different qualifications and standards (SAQA, 2001:5). ETQAs within these sectors were likely to differ in size and also in their wider roles, which is outside its scope (SAQA, 2001:5). Although the fundamentals of a QMS were relevant to all, there were

variations between the sectors (SAQA, 2001:5). Yet in the policy document SAQA (2001:5), admits that a singular model of QA management would be unlikely to fit all organisations. However, the outcomes should be the same, i.e. the development of a quality culture that benefited learners as well as society, as stipulated by the NQF's objectives (SAQA, 2001:5).

Quality management is thus dependent on the creation of a culture that values, which means that everyone accepts full responsibility for quality and has the flexibility to respond to the issue at hand (SAQA, 2001:5). For this reason, SAQA took the decision not to provide ETQAs with a prescribed QMS. However, any ETQA QMS had to include the following crucial roles:

- A quality culture should be created and sustained;
- Ensuring that the QMS contributed to the relevance, comprehensiveness and also to the clarity of qualifications and standards;
- Confirmation that providers ensured that the necessary skills of facilitators and assessments were in order;
- Confirmation that providers frequently monitor and report on the quality and efficacy of learning together with qualifications and standards;
- Confirmation that the providers ensure that the practices are enhanced in the light of what is learned from monitoring activities;
- Confirmation that there are adequate resources available and are used appropriately;
- Frequently seek, receive and act on feedback from their clients, namely SAQA, providers, SGBs, NSBs and stakeholders;
- Providers' outcomes are monitored and internal audit process and report back to providers, SAQA and NSBs (SAQA, 2001:5).

ETQAs, along with SAQA, played a critical role within the QMS of the NQF system (SAQA, 2001:6). They could adopt a culture that values quality within the NQF system by creating such a culture in their own organisation and through assisting as well as encouraging providers to do the same (SAQA, 2001:6). Yet if they were to adopt such a culture, they would have been dependent on the other component bodies of the NQF system, i.e. SAQA, NSB, SGB. However, there have been new advances regarding NSBs and SGBs (Erasmus *et al*., 2009:74).

For a quality culture to be adopted among ETQAs, they are likely to use a combination of the following:

- The primary accreditation which requires providers to undertake a range of assessments as well as QA activities and provide a report on the outcome of these activities;
- Monitoring activities that consist of direct auditing reports, systems, processes and outcomes as well as the sensible use of technically comprehensive external evaluations;

- Utilising comprehensive assessments which are thorough in nature, in order to confirm the knowledge (i.e. theory) as well as skills (i.e. practice) of learners, particularly where the related qualifications and standards are to inform crucial decisions; and
- Yearly reviews which consist of establishing and agreeing with providers' new quality goals and considering the previous year's accomplishments as well as the outcomes of monitoring activities (SAQA, 2001:6).

4.3.4. Quality Management Systems for Education and Training Providers

Education and training providers are the basis of the education and training system. They are the entities that are involved in teaching and learning, and deal directly with the learners, who are seen as the 'clients,' whom this system is meant to serve (SAQA, 2001c:2). For this reason, it was of vital importance that providers develop a QMS and that they receive the required support in order to operate within the NQF (SAQA, 2001c:2).

This document provided an explanation of the core criteria that providers had to conform to, so that they could receive accreditation from their designated ETQAs (SAQA, 2001c:2). The addition of these explained criteria was a direct response to the perceived needs of providers and was intended to assist the development of the QMS among providers (SAQA, 2001c:2). There are eight core criteria which are explained in Table 4.1. These core criteria are the minimum requirements for the initial phase of provider accreditation (SAQA, 2001c:2).

Table 4.1. An explanation of the core criteria for QMS of Training Providers. Source: (SAQA, 2001c:20).

Criterion	Explanation
1. Policy Statement	The organisation's aim, objectives, mission and purposes must be clearly stated.
2. Quality Management Systems	Determine processes and outline procedures that are used for the implementation of quality management in the organisation.
3. Review Mechanisms	An outline of the ways in which policy implementation would be monitored.
4. Programme Delivery	An outline of how learning programmes would be designed, delivered and evaluated.
5. Staff Policies	An outline of policies and procedures for staff selection, appraisal and development.

6. Learner Policies	An outline of policies and procedures for selecting learners and how are learners guided and supported.
7. Assessment Policies	Policies and procedures of the forms of assessment that are used and how they are managed are outlined.
8. Management System and Policies	Give an indication of the financial, administrative and physical structures and resources of the organisation, together with the procedures of accountability within the organisation.

The policy document emphasises that it does not replace the Criteria and Guidelines for Providers; instead it should be read in conjunction with it (SAQA, 2001c:2). The links between this document, Quality Management Systems for ETQAs as well as the Criteria and Guidelines for Provides were all emphasised, as all these documents were part of an integrated strategy of SAQA in order to allow the development of QMS among ETQAs and providers (SAQA, 2001c:3). According to SAQA (2001c:3), the links between the four documents were crucial, due to the nature of the relationship between the ETQAs and the providers. Providers needed to be clear about what ETQAs are mandated to do and, conversely, ETQAs needed to be aware of quality management issues relating to providers (SAQA, 2001c:3).

As with the Criteria and Guidelines for Providers, a process approach was adopted which considers the need for a phasing-in of aspects of the system into the wider model of transforming the national education and training system (SAQA, 2001c:2). A fundamental element of this document was that it established the need that quality management should be developmental in nature (SAQA, 2001c:2). As such, this document was designed in such a way that it aims to provide guidelines for the establishment of QMS for providers. The guidelines were provided to allow the movement towards the development of QMS for providers. The core criteria are also defined in the ETQA regulations as well as the other two parallel policy documents. Nevertheless, the document identifies that with respect to the implementation of QMS, a developmental approach is the most suitable.

It is clear that without these policy documents both ETQAs and providers would not have been able to be established, as these criteria and guidelines served as manuals and were required for their establishment. Yet these documents stressed the importance of QA and carried this

mechanism throughout. The SAQA also provides a policy document of the NQF's QMS, which was the mother of all QMSs within the OLS at the time.

4.4. THE NQF'S QUALITY MANAGEMENT SYSTEM

In the past, for SAQA to have realised its objective of enhancing the quality of education and training, the NQF provided a QMS that was holistic (SAQA, 2000:9). Figure 4.2. briefly illustrates the processes as well as structures that were needed for the QMS, which was related to the National Qualifications Framework. Ultimately, it was this representation that spoke to the progression of both QA and quality management activities which were needed for the accreditation, monitoring and auditing of both

ETQAs and providers (SAQA, 2000:9). In addition, this QMS included the assessment process of learners along with learning achievements (SAQA, 2000:9). The elements of this model are discussed below.

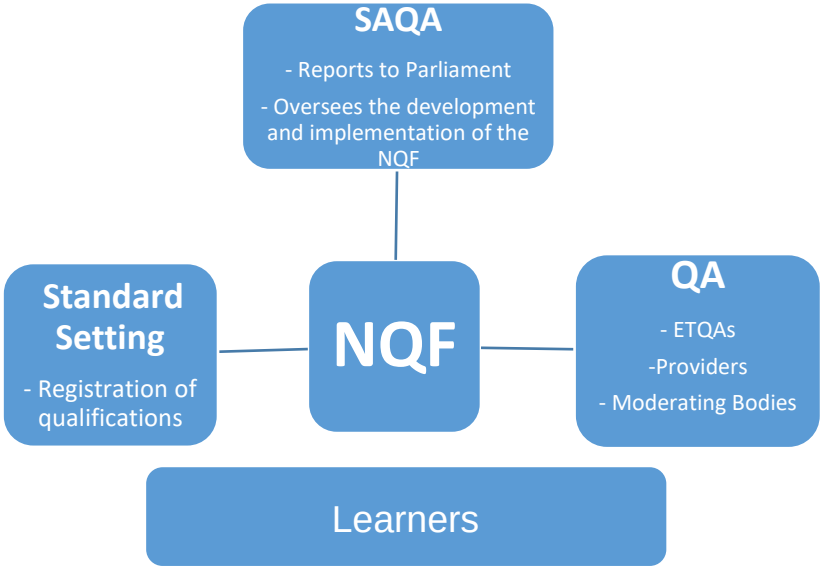

Figure 4.2. An adaptation of the NQF's Quality Assurance Model. Source: (SAQA, 2000:8)

4.4.1. Standard setting

The quality process, as illustrated above, starts with standard setting together with the registration of standards and qualifications on the NQF (SAQA, 2000:7). At the time, standard setting was structured into twelve organising fields of learning (2000:8). A national stakeholder for standards setting bodies was provided for and represented six stakeholder categories, equally (SAQA, 2000:8). As such, these bodies were accountable to constituencies, the two ministers as well as Parliament for the development of standards (i.e. units and qualifications) (SAQA, 2000:8). They recommended standards, so that they could be registered on the NQF, ensuring that all standards included clear statements of learning outcomes together with related assessment criteria and the necessary moderation and accreditation criteria (SAQA, 2000:8).

These bodies were also responsible for guaranteeing the quality as well as relevance, credibility and legitimacy of the recommended standards to the Authority (SAQA, 2000:8). The registered standards are also reviewed and when necessary the development of the standard setting process is also reviewed (SAQA, 2000:8).

4.4.2. QA filtered down to ETQAs, providers and moderating bodies

Once the standards had been registered, the ETQAs were accredited to monitor and audit the provision of assessment together with the achievement of the specific standards (SAQA, 2000:7). These processes took place through (a) the registration of assessors (b) accreditation of providers, and (c) QMS. The providers are then accountable to the ETQAs for the management, development as well as the delivery of learning programmes and services for which they had been accredited (SAQA, 2000:8). They also had to ensure the quality of learning experience as per the requirements of the registered standards (SAQA, 2000:8). The providers were given the responsibility of recording, researching as well as reporting on the outcome and impact of their learning programmes and services as well as the internal moderation process (SAQA, 2000:8). The moderating bodies, which were appointed by SAQA in accordance to NSB recommendations, were responsible for ensuring that the assessment processes were fair, valid and reliable through the NQF (SAQA, 2000:8) by means of external moderation.

The evaluation and reporting for both ETQAs and providers provided a direct and dynamic feedback mechanism for standard setting, which ensured the continual improvement of the standards that were registered on the NQF (SAQA, 2000:7). This feedback mechanism required the ETQAs to submit the following information to SAQA on a yearly basis:

- Learner enrolment of standards;
- Learner progression as well as achievements;
- The appropriateness of learning outcomes against assessment criteria;
- Learner accessibility to any further education and training or employment opportunities once completing the learning programme;
- Self-reviews and evaluations of QMS; policies as well as procedures in place between providers; and
- Proposals for new standards, or amendments to registered standards (SAQA, 2000:13).

Given the time and circumstances of the NQF's establishment, its quality management system was already somewhat well developed. However, the system omitted certain elements (such as design and development of qualifications and its certification process). For this and other reasons, the Quality Council for Trades and Occupations (QCTO) was established to correct the errors of SAQA. As such, the NQF's QMS provided the foundation for the QCTO's quality management framework. A further replacement was that of eight level descriptors to the

existing ten levels. All these amendments are discussed further in the Skills Development subsection.

Within the timeframe of the establishment of skills development, what follows the SAQA Act of 1995 is the Skills Development Act of 1998 along with its amendments.

4.5. SKILLS DEVELOPMENT ACT NO. 97 OF 1998

Aigbavboa, Emmanuel, & Moksha (2016:55), concurring with Haasbroek (2004:393), state that through education and training, skills development has always been the most powerful vehicle for the improving individual opportunity as well as institutional competitiveness. They emphasize that governments along with employers are aware of and identify the crucial role a skilled and knowledgeable workforce can play in gaining competitive advantages in international markets (Haasbroek, 2004:393; Balwanz, 2014:234).

Aigbavboa *et al*. (2016:56, citing Grawitzky, 2007) point out that the Skills Development Act (SDA) was promulgated as a fulfilment of section 23 of the 1996 Constitution. To some extent the Act provides an institutional framework to devise and implement national, sectoral and workplace strategies so that the skills of the South African workforce may be improved and developed (RSA, 1998:1). As stated in the SAQA Act, the NQF's objectives were intended to be integrated with the SDA and to provide learnerships that result in recognised occupational qualifications (RSA, 1998:1). As a result, the NQF provided the setting for the SDA and repealed the entire Manpower Training Act of 1981, the Guidance and Placement Act of 1981, the Local Government Act of 1985 and a section of the Telecommunications Act of 1996 (RSA, 1998:19).

The Act's objectives together with that of the Skills Development Levies Act were to be attained through the establishment of a stronger institutional and financial framework than that of the previous Manpower Training Act (Haasbroek, 2004:413). As a result, the National Training Board was replaced by the National Skills Authority (NSA) (Haasbroek, 2004:413). According to Haasbroek (2004:413) and the Skills Development Act (RSA, 1998a:5), this body was an advisory body to the Minister of Labour and was assigned with the responsibility of ensuring that the national skills policies, strategies and guidelines of implementation were adhered to. Furthermore, the industry training boards were replaced by Sector Education and Training Authorities (SETAs), which have been assigned with the responsibility of developing sector skills plans that have to be aligned to the national skills development strategy (Haasbroek, 2004:413; RSA, 1998a:5).

Two learning programmes have been identified within the SDA, namely learnerships and skills programmes (RSA, 1998a: 12, 14). These programmes created the foundation for occupational learning. Haasbroek (2004:414) asserts that learnerships have replaced the traditional

apprenticeships. The learnership consisted of a structured learning component and includes practical work experience of a specified nature and duration (RSA, 1998a: 2). The learnership leads to a registered SAQA qualification and is related to an occupation in the labour market (RSA, 1998a:12).

The work experience component pertains to structured learning and prepares the learner for the competency-based assessment (Haasbroek, 2004:414) together with specialising in a desired skill or trade. Skills programmes, on the other hand, assist the unemployed youth to enter the labour mark*et al*ong with improving the skill level of existing employees (Haasbroek, 2004:414). These programmes are not learnerships, but they are still required to meet the quality and other relevant criteria in order to qualify for grant payments from SETAs or the National Skills Fund (Haasbroek, 2004:414; Erasmus *et al*., 2009:80). As such, skills programmes are occupationally based (i.e. learning is conducted in the workplace) and once the learning outcomes have been completed, this will result in a credit towards a qualification which has been registered on the NQF (RSA, 1998a:14). The learning programme were trained by registered training providers and has to comply with the prescribed requirements (RSA, 1998a:14).

However, as time passed more challenges arose and in order to strengthen the SDA, the learning programme was amended. This brought about the SDA Amendment No. 31 of 2003, which made a number of important changes to the Act.

4.5.1. Skills Development Amendment Act No. 31 of 2003

In 2003, the key objective was to strengthen the Minister of Labour's powers to influence the work of SETAs and have a stronger hold on SETAs, so that they are accountable (Tshilongamulenzhe & Coetzee, 2013:28). Hunter (2012:393) and Tshilongamulenzhe and Coetzee (2013:28) explain that these changes were implemented as a result of the various difficulties that were experienced by a number of SETAs as well as the apparent inability of the Minister to intervene. As a result, the skills development unit, which SETAs report to, has been moved to the Department of Higher Education and Training (Tshilongamulenzhe & Coetzee, 2013:28).

One noteworthy amendment was the introduction of a new learnership idea, which allowed employers to contract a committed agency in order to perform their function in the learnership agreement and contract of employment (RSA, 2003:6; Tshilongamulenzhe & Coetzee, 2013:28-29; Hunter, 2012:394). The Minster became more empowered through the amended Act and was able to pass regulations to this effect and to prescribe the relationship between employers and the committed agency (RSA, 2003:10; Tshilongamulenzhe & Coetzee, 2013:28-29). Ultimately, the purpose of the amended Act was to strengthen the accountability of SETAs

to the Minister and to the Director-General of Labour (RSA, 2003:10; Tshilongamulenzhe & Coetzee, 2013:28-29).

South Africa's continuing skills shortage has led to another nationwide system review along with new ways of thinking, and serious consideration has been given to reform and reformulate the skills development and NQF legislation simultaneously (Tshilongamulenzhe & Coetzee, 2013:28-29). Similar to the Amendment Act of 2003, the Skills Development Amendment Act No. 37 of 2008 changed skills development completely.

4.5.2. Skills Development Amendment Act No. 37 of 2008

This amendment is seen as the most significant. The Act established the three Quality Councils. These bodies were introduced in order for the three sub-frameworks, which fell under the NQF, to be managed within SAQA (Dykman, 2009:1). Figure 4.3. depicts each sub-framework along with the responsible QC. The first sub-framework (NQF 1 – 4) is schooling and Umalusi is the responsible Quality Council. Following this, the second sub-framework (NQF 5-10) is accountable to the Council of Higher Education (CHE). The final sub-framework (NQF 1-10) is liable to the QCTO.

The new amendment also introduced the establishment of the QCTO. The primary aim of the QCTO is to coordinate learning towards occupational competence (RSA, 2008:4). The functions of the QCTO will be discussed in sub-section 4.11. Further changes to the Act include the development of new learning programmes, namely learnerships, the re-introduction of apprenticeships, skills programmes and any other prescribed programme, including a structured work experience component (RSA, 2008:4-5, 13). Once again, the SETA's function has changed. They have been assigned the responsibility of developing a sector skills plan within the framework of the national skills development strategy (RSA, 2008:9 & 10). SETAs have been tasked with implementing the sector skills plan through establishing learnerships together with monitoring the provision of education and training skills development in the sector (RSA, 2008:9, 10).

The promotion of learnerships and registered learning programmes also falls under the SETA as does the allocation of grants. One significant function of SETA is that they perform any functions delegated to them by the QCTO in terms of Section 26I of the Act (RSA, 2008:5-6).

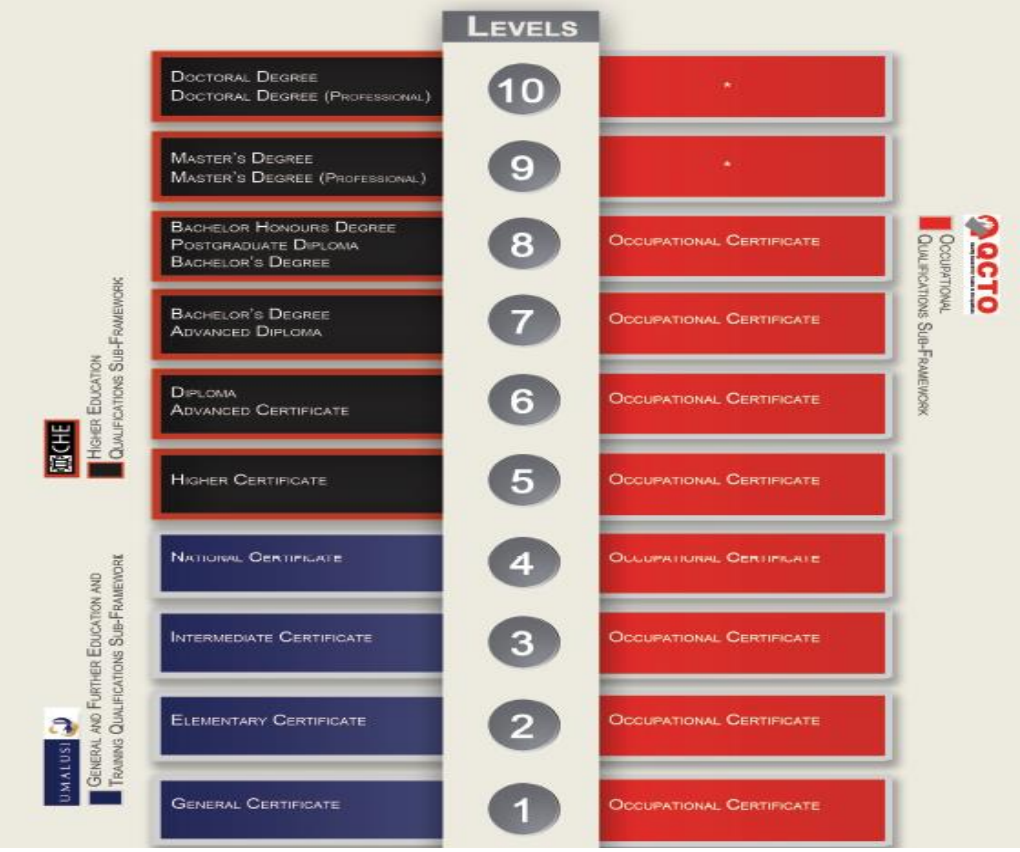

Figure 4.3. The responsible QC for the sub-framework and the ten levels of learning. Source: (SAQA, 2015)

The function of SETAs is to liaise with provincial offices, labour centres, the NSA as well as skills development forums (RSA, 2008:6). However, until such time the QCTO delegates powers and functions to the SETAs in terms of Chapter 6B of the Act, and a SETA ETQA will remain accredited by SAQA and will continue to perform all functions as stated in the SAQA Act (RSA, 2008:16; Dykman 2009:2). All of this is still applicable to date (2018).

A special unit, The Skills Development Planning Unit, was established to undertake the administrative function together with researching and analysing the labour market to determine the skills needed for the country as a whole. This unit also assists with formulating the National Skills Development Strategy (NSDS) together with sector skills development plans and provides information on skills to all stakeholders within the skills sector, including training providers, skills development forums in each province and the QCTO (RSA, 2008:8). In the Act, the definitions of the functions of labour centres have also changed (RSA, 2008:8). These centres are now responsible for planning, coordinating, supporting, monitoring and reporting on all activities taking place at all labour centres (RSA, 2008:8). Furthermore, they are responsible for providing information to workers, employers as well as the unemployed (RSA, 2008:8). Labour centres are tasked with performing the function of registering work-seekers together with finding placement opportunities (RSA, 2008:8). These centres also assist workers to enter learning programmes and to start their own income-generating projects (RSA, 2008:8)

The final amendment in this Act entailed artisan development. This development brought about the establishment of a national artisan moderation body and had to coordinate artisan development in the Republic (RSA, 2008:16). The functions of this body were to monitor the performance of accredited artisan trade test centres and also moderate these centres (RSA, 2008:16). They were also tasked with developing, maintaining and applying a national data bank of instruments for assessments and moderation of artisan trade tests together with developing and maintaining a national database for registered assessors and moderators; they record artisan achievements and make judgements on appeals along with recommending the certification of artisans to the QCTO (RSA, 2008:18). As far as trade tests are concerned, an artisan qualification can only be obtained if a trade test was taken and certified by an accredited trade test centre (Tshilongamulenzhe & Coetzee, 2013:30; Dykman, 2009:3; RSA, 2008:18). A trade test can only be taken if the individual has completed a learnership in the relevant trade or has met the necessary requirements of an apprenticeship or an accredited trade centre has certified that the individual has obtained sufficient prior learning in the relevant trade (RSA, 2008:18). What's more, the accredited test centre may also require a preliminary evaluation to determine whether the individual has the appropriate experience and knowledge (RSA, 2008:18). If all is in order, the QCTO issues the certificate of competency.

Shifting gears back to the 20th century, South Africa's transitional phase brought about the need to implement equality and inclusiveness within the country's workplaces, specifically that of the private sector. As a result, the Employment Equity Act No. 55 of 1998 initiated this, through the cooperation and compliance of employers. Yet this Act still incorporated aspects of skills development and promotes skills development initiatives.

4.6. HOW THE EMPLOYMENT EQUITY ACT NO. 55 OF 1998 INFLUENCES SKILLS DEVELOPMENT

Within any organisation, public or private, employees are employed so that the organisation can operate effectively along with becoming profitable. The skills of the employees are offered to the employer for the purpose of being effective and profitable, and in return the employees expect to be treated fairly together with receiving a fair market-related reward. It could be argued that this Act is an enforcer or initiator of skills development within organisations, thus making skill programmes and learnerships obligatory or compulsory in the workplace. These processes are administered by a framework of government laws and regulations, with the intention of preventing injustices and guaranteeing the future prosperity for individuals, the organisation as well as the country.

One of the primary laws governing human resources practices is the Employment Equity Act No. 55 of 1998. As it has had an immense impact on employment policies and practices (Nel,

2004:85) including skills development, this Act has become the core of labour legislation; among other things, it condemns all forms of discrimination in South African workplaces as well as in employment practices (Nel, 2004:85). The Act recognised the disparities in employment, occupations as well as income in the South African labour market as a result of the discriminatory laws of apartheid (RSA, 1998b:2). Therefore, the Preamble states that for the constitutional right of equality to be promoted and to exercise real democracy, unfair discrimination in employment needs to be eliminated by ensuring the implementation of employment equity in order to redress the effects of discrimination; achieving a diverse workforce that is a broad representation of our people; the promotion of economic development and efficiency in the workforce; and giving effect to the obligations of the Republic as a member of the International Labour Organisation (RSA, 1998b:2).

Indeed, it is evident that the principal aim of this Act is to promote fairness as well as equality. On this basis, Section 2 of the Act stipulates the purpose of the Act. It achieves equity by promoting equal opportunities and fair treatment in employment through eliminating unfair discrimination, and by implementing affirmative action measures to redress the disadvantages in employment experienced by designated groups, in order to ensure their equitable representation in all occupational categories and levels in the workforce (RSA, 1998b:12).

A way in which the Employment Equity Act significantly influences skills development is through affirmative action measures. According to the Act (RSA, 1998b:18), affirmative action measures are measures that have been designed to ensure that people from designated groups, who are suitably qualified, have equal employment opportunities and are equitably represented in all occupational categories and levels in the workforce of a designated employer. Given this, under sub-section (2), the fourth implementation measure seeks to retain and develop people from designated groups and to implement appropriate training measures, which includes measures relating to an Act of Parliament providing for skills development (RSA, 1998b:18). These measures are then implemented through the organisation's employment equity plan, as stipulated in sub-section (20), which will encourage reasonable progress towards employment equity within the organisation (RSA, 1998b:22). Organisations are accountable to the Department of Labour, as they would need to comply with the requirements of not only the Act, but also those of the organisation's employment equity plan, as per sub-section (35).

The funding of these skills/learning programmes, learnerships or apprenticeships is managed by a compulsory levy system, which also encouraged training and development in organisations. This levy system is implemented through the Skills Development Levy Act No. 9 of 1999.

4.7. SKILLS DEVELOPMENT LEVIES ACT NO. 9 OF 1999

The system of levy financing to fund skills development was established by the Skills Development Levies Act No. 9 of 1999 (SDLA). The Act also allowed for further regulations to be added under it which, subsequently, provided for the allocation of grants by the SETAs (Erasmus *et al*., 2009:82; Tshilongamulenzhe & Coetzee, 2013:23). The Skills Development Levy (SDL) is a levy that has been imposed on the private sector to encourage learning and development in South Africa (RSA, 1999:8; Warnich *et al*., 2015:383; SARS, 2017). The primary aim of the Act is to finance learning programmes that are aimed at developing scarce and critical skills by means of a compulsory levy system (Hunter, 2012:394; Tshilongamulenzhe & Coetzee, 2013:23).

The South African Revenue Services are the national collection agency and, according to Section 3 of the Act, every registered employer must pay a skills levy (Warnich *et al*., 2015:383; RSA, 1999:6). The employers must also be registered with the SETA and need to indicate their jurisdiction of the SETA to which they belong (RSA, 1999:8). Furthermore, an employer who expects the yearly payroll will be more than R500 000 becomes liable to pay the levy (SARS, 2017), as calculated for pay-as-you-earn (PAYE) and has to pay 1% of its total payroll as an SDL (Tshilongamulenzhe & Coetzee, 2013:23). Up until March 2001 the levy was 0.5% of the monthly payroll (RSA, 1999:6). The levy at present is 1% of the payroll (RSA, 1999:6). According to Warnich *et al*. (2015:383), some companies have been against the Act. The author asserts that the levy is another form of "de facto" tax that needs to be paid by companies and ultimately has a negative influence on the profitability of the company (Warnich *et al*., 2015:383). Consequently, a handful of employers have decided to cut their internal training budgets, so that they could make up for the money to be paid in levies (Warnich *et al*., 2015:383).

Surprisingly, the Act provides for exemptions to any public service employer in national or provincial government; however, public departments are still expected to budget 1% of their payroll for the purpose of training (RSA, 1999:8). Similar to the private sector, when public services submit their workplace skills plan, annual training reports and PIVOTAL Plans, they are required to report on the 1% of their budget, to their relevant SETA (Erasmus *et al*., 2009: 82; Tshilongamulenzhe & Coetzee, 2013:23). Any employer whose annual payroll does not exceed R500 000 is also exempted from the Act together with any religious or charitable institution that is exempt from income tax, and any national or provincial entity that receives 80% of its funds from parliament (RSA, 1999:8).

According to Section 2 of the Act (RSA, 1999:5-6), an employer has certain responsibilities towards SETA. The payment mentioned above is the most important. In terms of section 63 of

the Basic Conditions of Employment Act No. 75 of 1997, a labour inspector is appointed for the purposes of this Act in so far as it relates to the collection of levies by a SETA or its accredited body (RSA, 1999:16). The inspector has the power to monitor and enforce compliance to this Act by making unexpected visitations to the workplace or other place of business (that is not a home) (RSA, 1999:16).

Section 20 of the Act provides for any offences and states that; if anyone fails to apply for registration for the purposes of the levy or to pay any levy on the prescribed date, or fabricates any information in a statement or document, or fails to disclose any information, or omits or obstructs anyone in carrying out their functions, is committing an offence and is upon conviction liable for a fine or imprisonment for a duration of one year (RSA, 1999:18).

4.8. THE EVOLUTION OF THE NATIONAL SKILLS DEVELOPMENT STRATEGIES (NSDS) 2001 – 2011 AND BEYOND

The NSDS was developed as a means used by the DoL to steer the process of developing the skills of the South African labour force (DoL, 2009:3). This strategy was drafted by the DoL, whilst being guided by the National Skills Authority (DoL, 2003:1). The three legislative frameworks mentioned above are the key pieces which underpinned the NSDS: the SDA, SDL Act and the EEA (DoL, 2009:3; DoL, 2003:1). Each of which had its own purpose. Regardless, the SDA has made provision for the drafting of an NSDS, which would meet its objectives (Grawitzky, 2007:10).

This tool was seen as a necessity for transforming the racial and gender inequalities within the labour force (DoL, 2009:3). This was attained through extending opportunities for skills attainment to those groups who had previously been excluded or disadvantaged (DoL, 2009:3). It was further necessitated for creating an alignment between the skills that had been developed and the needs of South Africa's economy (DoL, 2009:3). The final necessity was to increase the level of investment in the training of the labour force, improving the quality of training being accessed along with establishing nationally accepted standards (DoL, 2009:3). Ultimately, the NSDS was developed with the intention of providing a broad national framework where skills development could take place (Grawitzky, 2007:10). These reasons provide a background for the development of the NSDS. At present three National Skills Development Strategies have been developed, with the fourth still being drafted. Each strategy and its objectives will be briefly discussed below.

4.8.1. NSDS I (2001 – 2005)

This strategy was implemented in 2001 and the strategies objectives had to be achieved in 2005. The NSDS brought forward the broad objectives of the SDA (DoL, 2009:1). The NSDS was titled "Skills for productive citizenship for all." The first phase had five objectives, twelve

success indicators and three equity targets (DoL, 2009:1). The equity target was applicable to each objective and stated that those benefitting from the strategy should be 85% black, 54% female and 4% people with disabilities (DoL, 2003:2). The five objectives consisted of: (1) Developing a culture of high-quality lifelong learning; (2) Fostering skills development in the formal economy for productivity and employment growth; (3) Stimulating and supporting skills development in small businesses; (4) Promoting skills development for employability and sustainable livelihoods for social development initiatives; and (5) Assisting new entrants into employment (DoL, 2003:2). The DoL (2009:3) and Grawitzky (2007:10-11) stated that most of the targets were achieved and the first five years produced the following successes:

- Over 899 686 workers attained an NQF level 1 through Adult Based Education and Training (ABET);
- Approximately 3 million workers were enrolled in structured learning programmes, whereby most of them finished these programmes;
- There was a substantial increase in the number of large and Small Medium Micro Enterprises (SMMEs) that registered for and paid the skills levy;
- Numerous initiatives were launched to support SMMEs, with about 60 000 employers benefitting from these projects which were funded by SETAs;
- This strategy saw a progressive increase in the number of WSPs submitted by both national and provincial government departments, together with an equivalent increase in the training expenditure of government departments; and
- In 2005 the total number of learnerships registered had increased to 811, of which 522 were active.

Following these achievements, the second strategy was introduced with the same hope of reaching its targets, along with addressing the prevailing weaknesses and bottlenecks of the first NSDS (Grawitzky, 2007:14). This strategy placed more emphasis on the quality of training and its impact (Grawitzky, 2007:14).

4.8.2. NSDS II (2005 – 2010)

The second skills strategy was implemented in 2005, with the vision of "Skills for sustainable growth, development and equity" (DoL, 2005:3; Warnich *et al*., 2015:379). The mission of the NSDS aimed at contributing to the sustainable development of skills growth, development and equity of skills development institutions which aligned their work as well as resources with the skills needs, in order to ensure effective delivery and implementation (DoL, 2005:3; Warnich *et al*., 2015:379). Compared to the previous strategy, the NSDS II was governed by 5 principles (DoL, 2005:3):

- Supporting economic growth for employment creation and poverty eradication;

- Promoting productive citizenship for all through aligning skills development with national strategies for growth and development;
- Accelerating B-BBEE, by means of the equity strategy;
- Supporting, monitoring and evaluating the delivery of quality assurance systems which are necessary for the implementation of the NSDS; and
- Advancing the culture of excellence in skills development as well as lifelong learning.

The strategy stressed quality training initiatives and equity together with skills development in the workplace (Squire, 2011). The second strategy recognised the need for employability (Squire, 2011). Squire (2011) pointed out that this strategic policy promoted assisting designated groups in attaining knowledge together with experience in a workplace setting in order to mitigate the critical skills gap. In essence, the strategy planned to initiate work-integrated learning (WIL) components. Lastly, this document conceded that a key aspect in skills development was the to ensure quality, which needed to be improved (Squire, 2011).

The two previous strategies were implemented under the auspices of the Department of Labour, Whereas NSDS III was developed and implemented through DHET. The final strategy is reviewed below.

4.8.3. NSDS II (2011 – 2013)

This document was implemented in January 2011 and was the all-encompassing guide for skills development that delivered a pathway to sector skills planning as well as implementation in the SETAs (DHET, 2011:5). Its vision was "A skilled and capable workforce that shares in, and contributes to, the benefits and opportunities of economic expansion and an inclusive growth path" (DHET, 2011:5). Additionally, the strategy's aim was to increase the accessibility of education, training and skills development opportunities as well as quality within this sector, and was committed to skills development paths, career development and sustainable employment together with in-work progression (DHET, 2011:5). The NSDS III had eight core principles:

- Developing a credible institutional mechanism for skills planning;
- Widening access to occupationally-directed programmes;
- Encouraging the growth of a public FET college system that is responsive to sector, local, regional and national skills needs and priorities;
- Focusing on the low level of youth and adult learning as well as numeracy skills to permit further training;
- Encouraging workplace-based skills development;
- Promoting and supporting cooperatives, worker-initiated NGOs, small enterprises and community training programmes; and

- Developing career as well as vocational guidance; and
- Improving service delivery and supporting the growth of a developmental state by increasing public sector capacity (DHET, 2011:11-22).

The focus within this strategy shifts to institutional learning which is aligned to occupationally-directed programmes (Squire, 2011). One can deduce that the strategy places more emphasis on attaining skills through workplace-based learning and vocational training, and it has identified that this can only be accomplished through improving FET colleges as well as vocational guidance. On paper, the strategy remains a "plan" or "guide", so the question remains whether these plans and principles will be implemented together with the development of NSDS IV.

4.9. BROAD-BASED BLACK ECONOMIC EMPOWERMENT (B-BBEE) ACT NO. 53 OF 2003

While South Africa was under the control of the apartheid regime, race was used as a means of control in order to limit access to the country's productive resources and to restrict access to skills (DTI, 2004:2). Yet a vast majority of the country's people are still excluded by the economy from ownership of productive assets or acquiring advanced skills (DTI, 2004:2). Due to the low level of income earned, generated by the majority of the nation's people, the South African economy performs below its potential (DTI, 2004:2). In the light of these issues, this Act seeks to promote the achievement of the constitutional right to equality, increase broad-based and effective participation of black people within the economy, and further promote a higher growth rate, increase employment together with an equitable distribution of income (DTI, 2004:2). The promulgation of this Act promoted economic unity of the country, protected the market and promoted equal opportunity as well as equal access to government services (DTI, 2004:2).

The preamble of the B-BBEE Act makes it clear that it was developed as a legislative framework for the promotion of black economic empowerment in South Africa. Consequently, the objectives were established as an aid in facilitating broad-based black economic empowerment by promoting economic transformation so that there is meaningful participation of black people in the economy. The Act was aimed at achieving a substantial change in the racial composition of ownership as well as management structures, and also in the skilled occupations of existing and new enterprises. The intention was ultimately to increase the degree to which communities, workers, cooperatives and other enterprises could own and manage existing as well as new enterprises, and increase their access to economic activities and infrastructure along with skills training. This legislative framework still seeks to increase the extent to which black women own and manage either existing and/or new enterprises and also

rapidly advance their access to economic activities, infrastructure and skills training (DTI, 2004:5-6). A key objective of the Act is to empower both the rural and local communities by granting them access to economic activities, land, infrastructure, ownership as well as skills (DTI, 2004:6).

The purpose of the B-BBEE Act is promoted by the Codes of Good Practice. These codes include a more detailed definition of B-BBEE along with indicators to measure B-BBEE. It provides guidelines for stakeholders within the related sectors of the economy to develop transformation charters and any other matter needed to achieve the objectives of the Act (DTI, 2004:8). The codes may also specify targets that are consistent with the objectives of the Act and the period within which these targets must be achieved (DTI, 2004:8). If anyone applies this Act, it must be interpreted by giving effect to its objectives and also comply with the Constitution (DTI, 2004:6).

The objectives of the Act have also made provision for skills development in enterprises. This demonstrates the importance of skills training in companies. However, the Amended B-BBEE Codes of Good Practice ("New Codes") introduced the concept of priority elements, i.e. ownership, skills development, and enterprise and supplier development. The New Codes have demanded far greater investment in all the elements. Yet more emphasis is placed on skills development, especially in terms of accredited training programmes and learnerships. Not only do these programmes provide a foundation for learning, but it also gives companies more points on their scorecard than soft skills do.

The new scorecard assigns 25 points towards the Skills Development element. What's more, companies are required to submit their Workplace Skills Plan (WSP) together with the Actual Training Report (ATR) and PIVOTAL plan to the relevant SETA; these reports have to be submitted annually, and has to indicate the company's internal skills training as per the requirements of SDL Act, yet still contribute towards skills development. With Skills Development, points are earned if 6% of a company's payroll is invested in the training of black people; a further 0.3% can be earned if the total payroll is invested in learning programmes for disabled black employees (Truter, 2017:2). Points are also earned for external training and taking part in learnerships, internships and apprenticeships; this allows the company to claim 4 points, if 2.5% of the staff are enrolled on such programmes, and an additional 4%, if 2.5% of the company's headcount are unemployed black learners (Truter, 2017:2). The company may earn bonus points if all the unemployed learners are gainfully employed once their learnerships are completed (Truter, 2017:2).

It is evident that the changes within the B-BBEE Act has essentially "forced" companies to comply with its objectives, ultimately promoting skills development and hopefully reaching the required targets through utilising qualifications within the NQF.

4.10. THE NATIONAL QUALIFICATIONS FRAMEWORK (NQF) ACT NO. 67 OF 2008

According to Warnich *et al*. (2015:381), for the excessive shortage of skilled labour to be rectified and considering the limited budgets available for skills development, South Africa's government embarked on various creative and resourceful programmes which included: the integration of different education departments into one controlling body, and the passing of the South African Qualifications Authority Act through Parliament. The SAQA Act has been replaced by the NQF Act, No. 67 of 2008. The NQF Act was passed to ensure the integration of education and training. This legislative framework was aimed at amending the current difficulties facing the provision of education and training in South Africa (Tshilongamulenzhe & Coetzee, 2013:31). According to Tshilongamulenzhe and Coetzee (2013:31), one key impact of the NQF is that it not only influences those working in education but also those working in employment. According to the Act (RSA, 2010:6-7), the objectives of the NQF are the following:

1. Create a single integrated national framework for learning achievements;

- Facilitate access to, and mobility as well as progression within education, training and career paths;
- Enhance the quality of education; and
- Accelerate the redress of past unfair discrimination in education, training and employment opportunities.

2. The NQF's objectives are designed to contribute to the full personal development of each and every learner, including the social and economic spheres of the nation at large.

3. SAQA and the QCs must seek to achieve the objectives of the NQF by

- Developing, fostering and maintaining an integrated and transparent national framework for RPL achievements;
- Ensuring that South African qualifications meet the appropriate criteria; and
- Ensuring that South African qualifications are of an acceptable quality (RSA, 2010:7).

The NQF Act is a comprehensive system and has been approved for the classification, registration publication and articulation of quality-assured national qualifications (RSA,

2010:6). The Act makes provision for the NQF and the responsibilities of the Minister of Higher Education and Training; it also provides for SAQA and, most importantly, the Quality Councils.

SAQA (2000:1) regards the NQF as a social construction that has been and will always be negotiated by the people, for the people. Tshilongamulenzhe and Coetzee (2013:606) defines the NQF as either a framework or a set of principles and guidelines that provides a national vision and structure for developing a qualification system. The system was designed to standardise the entire education and training system from NQF level 1 to level 10 (PhD), as illustrated in Figure 4.3. (Tshilongamulenzhe & Coetzee, 2013:32). According to the Act (RSA, 2010:7), the NQF is organised as a series of levels of learning achievements, which has ten levels of learning. Each level is described by a level descriptor, which is a statement of learning achievement. Furthermore, the level descriptor gives an extensive indication of learning achievements or outcomes that are appropriate for a qualification at its specific level. As such, level descriptors must be developed and specified RSA, 2010:7).

Since replacing the SAQA Act No. 58 of 1995, the NQF system has changed immensely and most of these changes were made through the NQF Act. The amended NQF consists of the following key aspects:

- An NQF that consists of 10 levels;
- Equally valid unit standard-based and whole qualifications;
- The 12 National Standards Bodies were replaced by the Standards Advisory Panels with the aim of standard setting in order to streamline the NQF;
- The Communities of Experts (CEP) replaced Standards Generating Bodies (SGBs);
- The development of a smaller SAQA board;
- The establishment of three quality councils, namely Umalusi, the Higher Education Quality Council (HEQC), and the Qualifications Council of Trade and Occupations (QCTO), illustrated in Figure 4.3.

One significant revision is represented within the sub-framework. As each one has its own quality council. The NQF Act has immense influences within all the education and training sectors, this includes General and Further Education and training, Higher Education as well as occupational learning, as indicated in Table 4.2. and below:

- The General and Further Education and Training Qualifications Framework (GFETQF) falls under the Department of Basic Education, however, the FET sector falls under the Department of Higher Education and Training (DHET);
- The Occupational Qualifications Framework (OQF) falls under the DHET; and

- The Higher Education Qualification Sub-Framework (HEQSF) falls under the DHET.

Table 4.2. The three sub-frameworks and its responsible Quality Council. Source: (QCTO: 2013b).

Sub-framework	NQF levels associated with sub-framework
General and Further Education and Training Sub-Framework (GFETQSF)	1 to 4
Higher Education Qualifications Sub-Framework (HEQSF)	5 to 10
Occupational Qualifications Sub-Framework (OQSF)	1 to 8

These councils need to collaborate and co-ordinate with each other in order to maintain the NQF's principles as well as achieve its objectives (Tshilongamulenzhe & Coetzee, 2013:33). This means that these quality councils are responsible for the three sub-frameworks, which fall within a single NQF, and are managed by the NQF; whereby SAQA is responsible for the co-ordination (Tshilongamulenzhe & Coetzee, 2013:33). Accordingly, the NQF should be seen as a representation of an integrated learning framework throughout South Africa. Its intention is to integrate institutional training with workplace practice, giving rise to the OQF as well as the QCTO,

4.11. QUALITY COUNCILS IN SOUTH AFRICA, SPECIFICALLY THE QUALITY COUNCIL FOR TRADE AND OCCUPATIONS (QCTO)

Although there are three QCs, in this study a greater focus will be placed on the QCTO. The Skills Development Amendment Act No. 37 of 2008 provides for the establishment of the QCTO (RSA, 2008:36). The Amendment Act assists in the development of a demand-driven occupational learning system that will offer applicable occupational skills (particularly with regards to workplace experience) and one that is less bureaucratic (DoL, n.d.:4). The change in legislative direction focuses on ensuring fit-for-purpose qualifications within the labour mark*et al*ong with SETAs having to collect information on what is needed in terms of occupations; and the QCTO has to ensure that there are fit-for-purpose occupational qualifications in order to respond to the labour market needs (DoL, n.d.b:2).

This quality council manages and coordinates the qualifications in the occupational qualifications framework (OQF), which is an integral part of the NQF (RSA, 2008:20), in relation to their development, provision, assessment and impact (DoL, n.d.a:4). According to the Department of Labour (n.d.a:4), the QCTO's task will be the development and QA of fit-for-purpose occupational qualifications together with unit standards as required by the labour market for the purposes of work as well as employment.

The QCTO is a juristic body (RSA, 2008:20) and is responsible for QA and standard-setting pertaining to occupational qualifications in South Africa (Tshilongamulenzhe & Coetzee, 2013:79). Furthermore, the QCTO manages its sub-framework, the OQF, in order to ensure quality in the design and development of occupational qualifications together with the delivery, assessment and certification processes which are necessary to develop occupational competence (Tshilongamulenzhe & Coetzee, 2013:79). Matjabe (2013:9) describes the purpose of occupational qualifications and establishes that it is to qualify a learner to practice an occupation that is reflected in the Organising Framework for Occupations (OFO) or an occupational specialisation that is associated with an occupation that is reflected on the OFO.

The SDA (RSA, 2008:4) defines an occupational qualification as a qualification that is linked to a trade, occupation or profession which results from work-based learning and consists of knowledge unit standards, practical unit standards together with work experience unit standards. These qualifications cover all ten levels of the NQF and the overall aim is to qualify an individual to practice the occupation (DoL, n.d.b:7). Occupational qualifications consist of two types of qualification: the first is a national occupational award which certifies the achievement of an occupation that is listed on the OFO; and following this is a national skills certificate which certifies competence in a specialisation that is related to an occupation or a group of related occupations (DoL, n.d.b:7), as depicted in Figure 4.4.

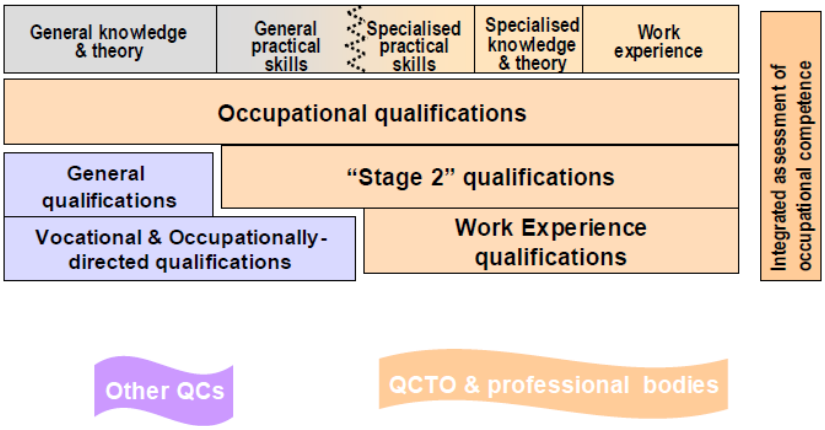

Figure 4.4. The OQF. Source: (DoL, n.d.b:6)

According to Section 26H of the Skills Development Act, the functions of the QCTO are outlined as follows:

1. The Minister must be advised on all policy matters which concern occupational standards and qualifications;
2. The QCTO must perform its function in terms of the SDA as well as the NQF Act of 2008;

3. Subject to any policy issued by the Minister in terms of section 26F, the QCTO is responsible for:
    - Establishing and maintaining occupational standards and qualifications;
    - The QA of occupational standards and qualifications as well as learning in and for the workplace;
    - Designing and developing occupational standards and qualifications and submitting them to the SAQA for registration on the NQF;
    - Ensuring the quality of occupational standards and qualifications and learning in and for the workplace;
    - Promoting the objectives of the NQF;
    - Liaising with the NSA on the suitability and adequacy of occupational qualifications and on the quality of learning in and for the workplace;
    - Liaising with the SAQA, other QCs and professional bodies for establishing standards and qualifications or the QA of standards and qualifications; and
    - Performing any other prescribed functions;
4. The QCTO has all such powers as are necessary to enable it to perform its function in terms of Section 26H (RSA, 2008:20).

According to Tshilongamulenzhe and Coetzee (2013:80), the establishment of this new QC has been praised as a major achievement for occupational learning in South Africa for a number of reasons. The QCTO structures the discussion between the labour market and the education and training sector; occupational qualifications are established as a legitimate and credible type of qualification by the QCTO; the skills needs within the labour market are addressed; through credible learning programmes, graduates and school leavers are able to access the labour market; and the QCTO provides career development opportunities as well as further progression for those who are currently employed (Tshilongamulenzhe & Coetzee, 2013:80).

While performing their functions, the QCTO will work with various role-players such as the DoL, DHET, the National Artisan Moderating Body, professional bodies, Further Education and Training Colleges, Skills development providers and agencies (DoL, n.d.b:4).

Through confronting the implementation problems of the NQF, the QCTO brought about opportunities to find practical and powerful solutions; and are detailed below:

4.11.1. A framework for various role-players which has been provided by a QC

The numerous role-players together with structures who are active in the labour market, namely the SETAs, Standard Governing Bodies, providers, assessors and professional bodies, have developed a situation that is over-complex and inefficient (DoL, n.d.a:5). For this reason, the QCTO provides a framework that is coordinated in order to support these role-players so that

they can focus on what they do best and give coherence to these activities as a whole (DoL, n.d.a:5).

4.11.2. A qualification model that has been improved so that it's fit for occupational learning

In order for workers to practice a certain occupation effectively, they need to be competent in three learning areas:

- Knowledge and theory component;
- Practical skills component; and
- Work experience component (DoL, n.d.a:6).

Each of these components is equally valued in the new model (DoL, n.d.a:5). In comparison to the old qualification model, it differs as it consists of a structured work experience component (DoL, n.d.a:6) as illustrated in Figure 4.4.

4.11.3. Labour-market needs are addressed through a qualifications design process

As a basis, the new model evaluates the applicable occupations as listed in the OFO, and identifies skills together with tasks that are associated with each occupation and the kind as well as scope of work experience that is needed to develop competence (DoL, n.d.a:6). As a result, occupational curricula and occupational qualifications are directly linked to labour-market skills needs through this process (DoL, n.d.a:6).

4.11.4. The creation of occupational learning programmes that are guided by curricula

Occupational learning programmes are drawn from an occupational curriculum (DoL, n.d.a:6). The curriculum is aimed at simplifying and strengthening the development and assessment of the qualification (DoL, n.d.a:6). Furthermore, the curriculum stipulates the inputs required by unpacking the occupational profile, and will be utilised as the foundation for the accreditation of providers as well as the approval of workplaces so that they can provide the work experience component (DoL, n.d.a:6). It ensures that qualifications which overlap across qualifications are recognised; ultimately, this will facilitate the design of learning programmes, material development as well as learner mobility (DoL, n.d.a:6-7).

4.11.5. The three forms of learning are reflected through reconceptualising unit standards

In each of the curriculum components the outcomes are specified in the unit standards (DoL, n.d.a:7). However, the more generic knowledge and practical standards will be reflected in numerous qualifications (DoL, n.d.a:6). For meaningful units of learning to be developed, a minimum credit value for unit standards will be set (DoL, n.d.a:7).

4.11.6. Standardising assessments through the specification of qualification assessments

As a criterion for certification, the QCTO has introduced an external, nationally standardised assessment for each of its occupational qualifications (DoL, n.d.a:7). According to DoL (n.d.a:7), the overall assessment strategy for the external assessment of competence is specified in a qualification assessment specifications document. What's more, this document specifies the criteria for the registration of constituent assessors as well as moderators, along with the requirements for accreditation of assessment centres (DoL, n.d.a:7). This ended the current differences in terms of how standards have been interpreted across the OLS sector (DoL, n.d.a:7). Furthermore, the QCTO has both appointed and recognised suitable organisations as quality partners in the design as well as the management of these external assessments (DoL, n.d.a:7).

4.11.7. The differing requirements of various qualifications that have been reflected through the revised rules of combination

In order for learners to cope with the occupational learning demands and benefit from this learning process, they would have to show adequate foundational competence in communication and mathematical literacy (DoL, n.d.a:7-8). Further requirements in other subject areas such as language, mathematics, knowledge or theory have been determined by the needs of each specific occupation and will also be fit-for-purpose (DoL, n.d.a:8). Once determined, these requirements have been included in the core (i.e. compulsory) learning requirements of the qualification (DoL, n.d.a:8).

Initially, the 'fundamental' requirements that previously existed were seen as criteria that covers a wide-range of aspects and was rather time-consuming (DoL, n.d.a:8). The DoL (n.d.a:8), maintains that these requirements often resulted in the accumulation of credits that were not relevant to a certain occupation. The new model eliminates this barrier and the educational requirements have been related to the relevant career (DoL, n.d.a:8). In addition to these changes, the 'electives' (i.e. the unit standards that can be chosen) have been replaced with specialisations (DoL, n.d.a:8).

4.11.8. Streamlining QA processes through combining multiple ETQAS

The efficacy of the current ETQA system will be increased by the establishment of the QCTO, as they have merged twenty-three SETA ETQAs into one (DoL, n.d.a:8). Hence, QA activities will supposedly be better coordinated and managed (DoL, n.d.a:8). The DoL (n.d.a:8) claims that the QCTO will quality assure all occupational unit standards.

4.11.9. A 'gentle' take on the process of accreditation which promotes self-improvement

Since the development of the NQF and SAQA there has been an over-emphasis on accreditation as being the key process to QA (DoL, n.d.a:8). Given this, the QCTO has simplified the

accreditation process by applying criteria which are stated in each curriculum together with being fit-for-purpose for each qualification (DoL, n.d.a:8). This process starts with self-evaluation and also promotes quality improvement (DoL, n.d.a:8). Consequently, the overlapping of accreditation, registration and verification requirements have resulted in substantial delays, frustrations as well as accumulating costs (DoL, n.d.a:8). Yet according to the DoL (n.d.a:8), these requirements will no longer apply.

4.11.10. Credible qualifications achieved through a balance between flexibility and standardisation

The final solution brought about by the QCTO is that the new model is adequate enough to ensure the credibility of the system and also includes enough flexibility to maximise 'fitness-for-purpose' (DoL, n.d.a:9).

4.12. SUMMARY OF QCTO SOLUTIONS

Given these problems and considering the solutions, the new model is aimed at enhancing the processes for creating occupational competence together with improving the quality and credibility of learner achievements (DoL, n.d.a:10). Ultimately, this model has been designed to ensure that the system is more responsive to the country's labour market needs. However, its key contribution will be strengthening the 'occupational arm' of the NQF so that unique learning requirements for building occupational competence are accommodated (DoL, n.d.a:10). Through strengthening this arm of the NQF, the QCTO can provide an alternative learning pathway for both young people and workers so that they can access learning, gain work experience and become employed (DoL, n.d.a:10).

4.13. THE QCTO'S QA FRAMEWORK

The functions of the QCTO demonstrate a new approach to QA, where QA infuses all activities and is not viewed as a separate function (DoL, n.d.a:5). What is concerning is that the QCTO has no QA policy document as the NQF has. Although there is an option for this document on their website, there is no document to be downloaded. Nevertheless, there is a policy document with regards to the QCTO's sub-framework as well as criteria for Assessment Quality Partners (AQPs) and accreditation of assessment centres. As there is no official or implemented QA policy document, this framework had to be established from various QCTO conference proceedings and other relevant QCTO documents.

The DoL (n.d.b:2), establishes the purpose for the occupational qualifications QA framework. They state three purposes that are reflected in the framework's three QA processes. The purposes are to ensure that:

i. Occupational training addresses the skills needs of the labour market;

ii. The learning experiences which are offered are structured, appropriate as well as purposeful; and

iii. The achievement of occupational qualifications reflects occupational competence (DoL, n.d.b:2).

Two of the solutions to the problems discussed earlier are seen as principles which guide the QA process together with new principles, namely making use of data analysis to identify problems; utilising existing expertise as well as structures; prioritising QA requirements and focusing on key processes; providing enough flexibility to ensure fitness for purpose; and provide sufficient standardisation to achieve credibility (DoL, n.d.b:3). The model was established so that qualification development and QA could be under one roof. The QA of the learning process for the QCTO's qualifications can be viewed as a structure whereby the roof is supported by two pillars: one side is design and development and the other is assessment of occupational competence, as illustrated in Figure 4.5. (DoL, n.d.b:5).

The overarching roof quality manages the system and represents M&E through data analysis and research (DoL, n.d.a:5). Evidently, this structure demonstrates the quality-assurance model.

Considering the structure demonstrated in Figure 4.5, the highest-level overall purpose of the QCTO QA Framework is ensuring that occupational training addresses the skills needs of the labour market (DoL, n.d.b:4). This is achieved through the involvement of the research processes (DoL, n.d.b:4), as illustrated in Figure 4. 5. Ultimately, the research process can be viewed as the keystone of this structure.

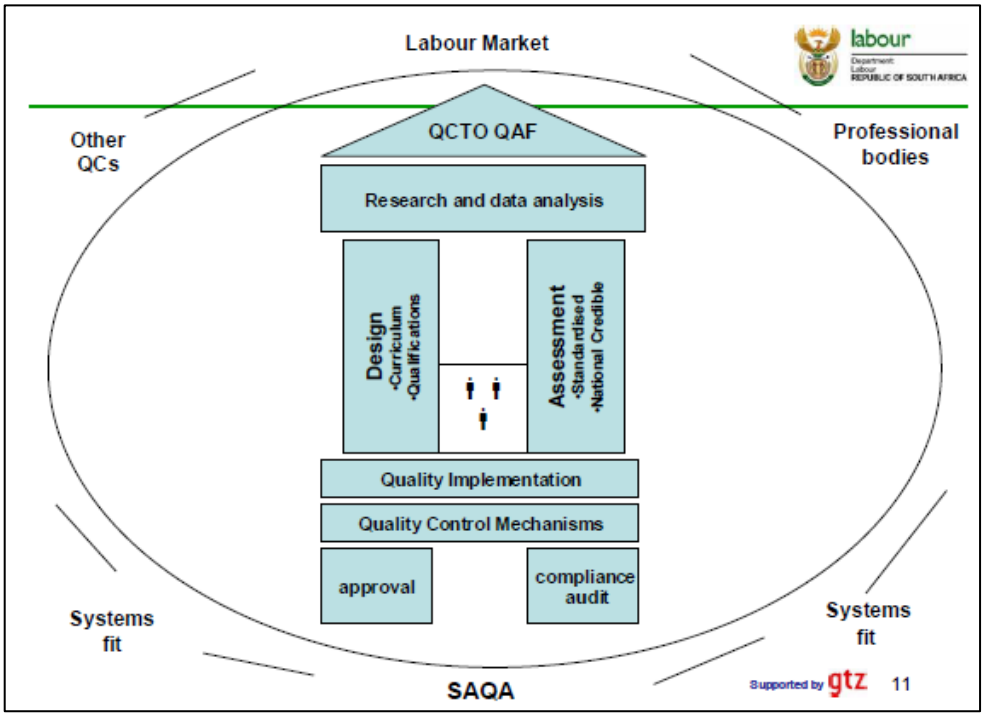

Figure 4.5. The QCTO's QA model. Source: (DoL, n.d.b:11)

The research process involves designing appropriate performance indicators which reflect the purposes; this process collects and analyses relevant data and makes use of data analysis and identifies any issues or difficulties; it also forms the basis for monitoring and evaluation as well as reviewing activities (DoL, n.d.b:4). This ensures that the learning experience is structured, appropriate as well as purposeful this purpose requires that the design process is credible (DoL, n.d.b:5).

Figure 4.5 demonstrates that design is one of two pillars supporting the structure. According to DoL (n.d.b:5), this process is expert- and practice-driven; the qualifications together with the curricula are fit-for-purpose; additionally, the required learning inputs are specified in the curriculum for the achievement of occupational competence for the particular qualification; the required outcomes are specified by the qualification; and this process allows for articulation between providers from different parts of the system (DoL, n.d.b:5), recently, however, only 50% of the credits could be transferred (QCTO, 2013b:15).

This provision has been put in place so that the awarding of multiple qualifications for the same work can be avoided together with ensuring that occupational qualifications with different objectives are not embedded within each other (QCTO, 2013b:15).

The second pillar of Figure 4.5 illustrates the assessment process. The purpose of ensuring learner achievement will produce authentic genuine occupational competence requires credibility of assessment processes (DoL, n.d.b:7). Therefore, the learning outcomes are specified in the qualifications and are needed so that the occupational competence is achieved or at least measurable; the assessments are standardised nationally; this process focuses on externally conducting integrated assessments of occupational competence and is conducted by agencies that are accredited as well as monitored by the QCTO; according to the DoL the processes are economical, effective and efficient (DoL, n.d.b:7).

The next part of the structure forms its foundation, that is quality implementation. The purpose of quality control over implementation is to check that programmes are implemented according to the requirements of the curriculum and also the assessment requirements (DoL, n.d.b:9). This process ensures that the public is informed about which programmes and delivery resources have received approval from the QCTO; and that they know where QCTO-approved centres offering integrated assessments of occupational competence are located (DoL, n.d.b:9).

A key element of this structure is that it is supported by two foundations. This is its quality control mechanisms, which are further supported by two building blocks, i.e. approval and compliance as depicted in Figure 4.6. Learning as well as assessment requires approval of programmes and the delivery of resources against the specifications of the curriculum, which include assessment guidelines (DoL, n.d.b:10). What's more, workplaces as sites of learning

also require approval according to the curriculum specifications and compliance audits will take place where necessary (DoL, n.d.b:10).

4.13.1. THE COMPONENTS OF THE QCTO'S QUALITY MANAGEMENT MODEL

This system relies heavily on the design (which is seen as the inputs) and assessment (the outputs) as significant QA processes and it ultimately focuses on these. Given this structure, i.e. the QA model, the QCTO's quality management model also has to be considered and is depicted in Figure 4.6. Although the QCTO is rather small, they work through their partners so that the quality management system can be implemented at all levels of the OLS. It is important to note, currently, the QCTO has no published document of their quality management model or their quality assurance framework. Through extensive research, this model predominantly relies on one author as well PowerPoint presentations that were delivered by the QCTO.

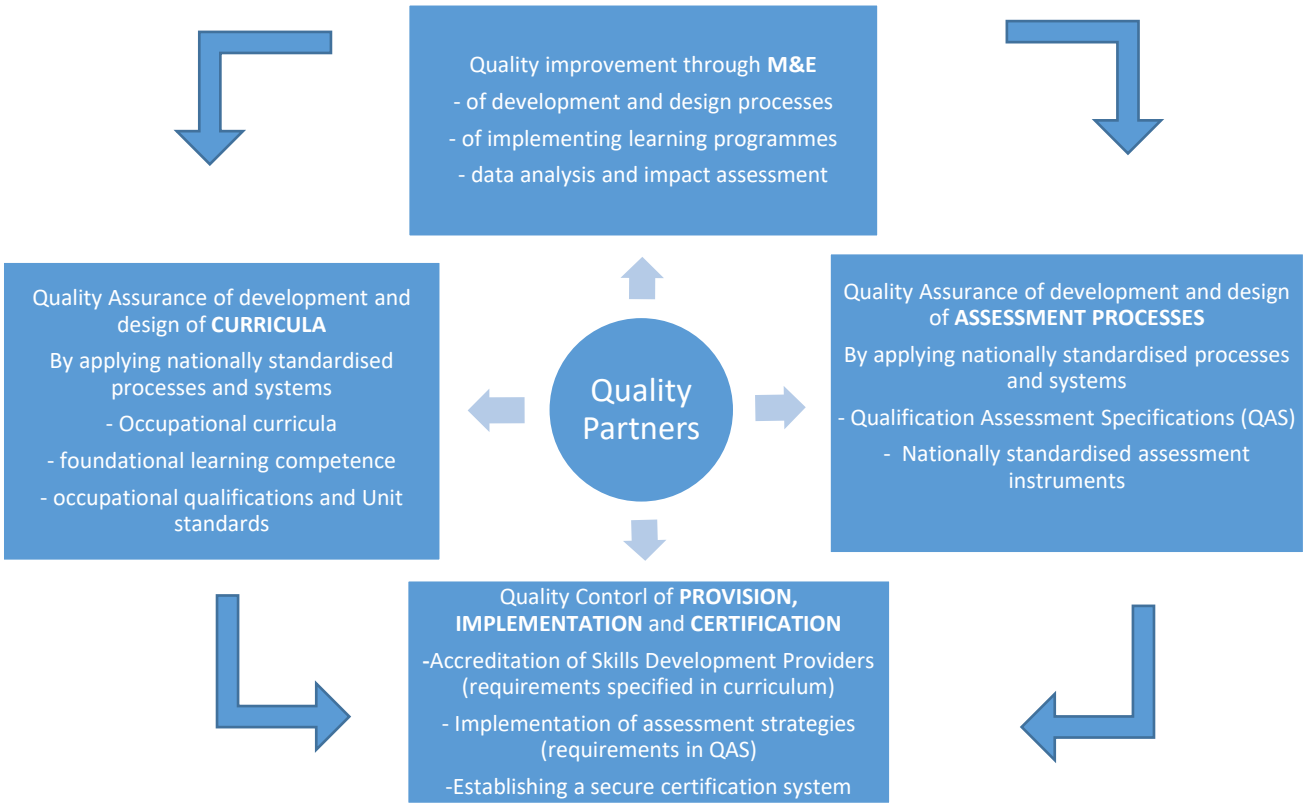

Figure 4.6. The QCTO's Quality Management Model. Source: (DoL, n.d.b:9)

4.13.1. QA of development and design of curricula

The development of occupational qualifications, which includes occupational curricula and external assessment specifications, is demand driven, and not supply driven (DoL, n.d.b:10). The constituent industry makes an application to the QCTO with regards to the OFO; this then steers the process whereby the QCTO will appoint a development quality partner to manage the design of the product as well as an assessment quality partner who will manage the assessment processes (DoL, n.d.b:10).

Yet the QCTO still focuses on existing bodies that are best suited to fulfil these additional functions, for instance, professional bodies, occupational associations and SETAs (DoL, n.d.b:10). The design process may only progress after the QCTO has appointed both the quality partners and after the development partner has appointed a registered QCTO development facilitator (Department of Labour, n.d.b:10).

4.13.2. Quality control of provision, implementation and certification

The provision, assessment and certification processes are controlled by the QCTO by means of applying specified criteria in terms of the approval of regulated occupational learning programmes; accrediting Skills Development Providers (SDPs); implementing assessment strategies; as well as establishing a secure certification system. According to Tshilongamulenzhe (2013:178), the accreditation of SDPs is crucial as they are required to deliver curriculum components together with conducting internal assessments against the relevant unit standards. These learning institutions will be accredited on the basis of their ability to provide the skills development components of knowledge, theory and practice which are outlined in the curriculum (Tshilongamulenzhe, 2013:178). As such, the QCTO uses self-evaluation as a means of accrediting SDPs.

This accreditation method is measured against general criteria along with certain requirements which are specified in the relevant occupational curriculum component as well as recommendations from industry or an acceptable record of accomplishment (Tshilongamulenzhe, 2013:178). The culture of self-regulation together with strong ties to related professional, occupational and industry bodies as well as associations are encouraged so that standards can be maintained and raised even further (Tshilongamulenzhe, 2013:178). SETAs will have to shift their monitoring focus towards implementing occupational learning programmes in line with the DHET regulations (Tshilongamulenzhe, 2013:178). The SETA's regulatory and QA functions are co-ordinated by the QCTO so that the resources can be utilised more effectively.

4.13.3. QA of development and design of the assessment processes

The responsibility for accrediting assessment centres is the QCTO's to ensure that a final integrated assessment of occupational competence is conducted, together with assisting in the development of banks of assessment tools, which are viewed as the alternative mechanism to standardise assessment practices nationally (Tshilongamulenzhe, 2013:178). The QCTO provides a policy document for the accreditation of assessment centres and is seen as a guideline for providers to ensure the standardisation of assessments (QCTO, 2013a: 5). One crucial component within this process is having an effective management information system (MIS). The QCTO has collaborated with SAQA so that the National Learners' Records Database

(NLRD) can be maintained and this system is comprised of qualifications, part-qualifications as well as learner enrolment and achievements, as well as any other relevant information (QCTO, 2013:23).

This process also involves having assessment instruments for QA in place, as illustrated in Figure 4.6. Moderation ensures that the assessment of the learning outcomes, as described in the occupational standards and qualifications, are fair, valid, reliable and unbiased (Naidoo, 2016:16). Internal moderation is seen as a monitoring mechanism for providers to ensure all assessments are standardised. This then produces moderation reports for verification purposes.

The verification process is managed by the relevant assessment quality partner or the QCTO for externally checking moderation processes and confirming or overturning (i.e. disagreeing with) the moderation findings (Naidoo, 2016:10). In addition, the verification process consists of verifying internal assessments, assessment centres as well as statement of results (Naidoo, 2016:10). Monitoring is seen as a continuous process of reviewing the QA processes and procedures that are conducted both internally and externally in order to determine compliance and to recommend quality improvements (Naidoo, 2016:11); this process produces monitoring reports for SDPs. The final process is the approval of learner results. Naidoo (2016:13), demonstrates this by referring to the QCTO's approval of results policy, which outlines the minimum requirements.

4.13.4. Quality improvement through M&E

This is the final component of the QCTO's quality management model. As established earlier, the QCTO conducts research so that the effectiveness of learning interventions can be monitored within the OLS. Figure 4.7. illustrates that M&E is concerned with the development and design processes, the implementation of occupational learning programmes as well as data

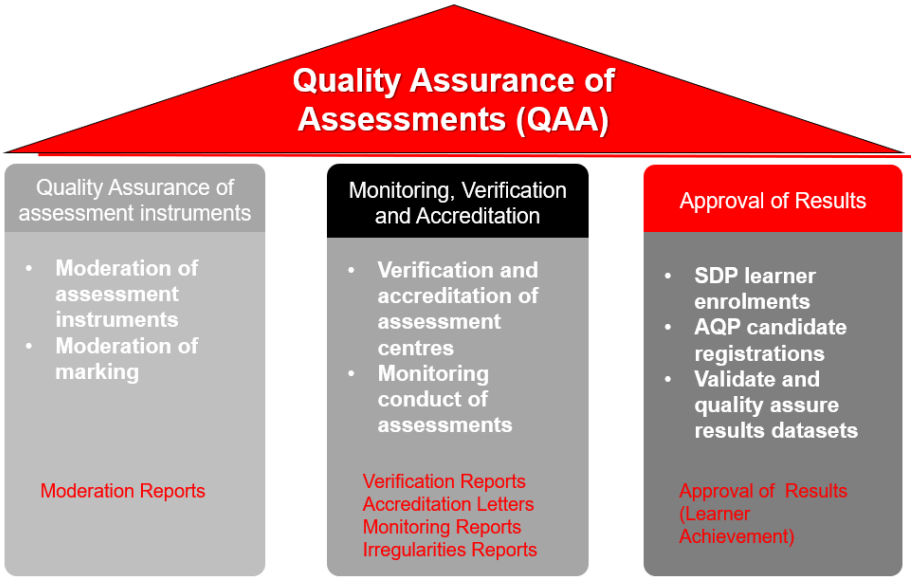

Figure 4.3. The QA Assessments process. Source: (Naidoo, 2016:10).

analysis and impact assessment, both qualitatively and quantitatively. According to Tshilongamulenzhe (2013:178), qualitative impact assessment emphasises the appropriateness as well as relevance of skills; the credibility of assessment; enhancing employability; and increasing productivity and quality of work. On the other hand, quantitative impact assessment is concerned with ascertaining whether the learning programme is delivering the right number of people and also on the balance between supply and demand (Tshilongamulenzhe, 2013:179). As part of the QCTO's M&E process, it will conduct statistical analysis of learner data which includes enrolment, completion and certification rates (Tshilongamulenzhe, 2013:179).

4.14. SUMMARY

As with any teenager or adolescent, the only way to learn is through trial and error, plus of course assistance from your parents. South Africa's OLS has a number of legislative frameworks as well as policy documents and statutory bodies governing it, which has moulded it into the system it is today. These frameworks, policies and bodies enforce numerous regulations within the skills development sector in both public and private vocational entities. But to some extent effective and efficient communication channels are lacking between these statutory bodies. As a result, the legislation, guides and policies are not streamlined. Controversially, the B-BBEE Act as well as the EE Act, forces the private sector to establish skills development initiatives within workplaces, yet public sector institutions are excluded. Nevertheless, it is clear that the establishment of the QCTO implemented new requirements for QA. Yet an official QCTO QA framework or policy guide has not been made available on its public domain.

CHAPTER 5

RESEARCH AND METHODOLOGY

5.1. INTRODUCTION

Chapter 2 discussed in-depth aspects of QA and TQM along with exploring the shift from QA toward M&E with better insight into impact evaluation. Chapter 3 provided a comparative analysis of vocational education and training systems internationally, in order to ascertain the best QA practices abroad. Chapter 4 provides the legislative and policy underpinnings of skills development in South Africa as well as describing the two QA Frameworks from SAQA and the QCTO. This chapter pertains to objective 4, to identify and compare the best QA practices, in order to analyse the similarities and differences collected in the data obtained from the private and public vocational institutions. An emphasis will be placed on developing an integrated model which standardises the QA process throughout the institution. However, to achieve this, the chapter will explain what is to follow in chapter 6 and provides a blueprint of the research design along with the methodology, the study setting, data-collection methods, the method(s) which were used to analyse the data, sampling and coding, and the ethical considerations relevant to the study. The limitations of the study are discussed in Chapter 7.

5.2. RESEARCH DESIGN AND METHODOLOGY

The study is qualitative in nature and is conducted by making use of qualitative approaches. For this study to be feasible, the research design is case study based. The emphasis is on investigating, understanding and explaining how the two vocational institutions' Standard Operating Procedures (SOPs), QA system and policies are implemented. This entailed comparing trends between the institutions' procedure and QA practice. Often the procedures that are written into the policies are not always implemented within the practice. Given this, the research hopes to determine the best QA practices, so that quality is not substantiated or the purpose of judgement; moreover, it discusses quality for the purpose of determining best practices.

Perri and Bellamy (2012:3) along with Babbie (2010:309), refer to case studies as research studies that are conducted considerably in-depth and as extensive as possible of either a single case or of a number of small cases. This research has two cases: (1) a public vocational institution and (2) a private vocational institution. It is important to note, because the study is a comparative analysis, the research methodology, data collection, data analysis and sampling will be carried out in exactly the same way at both institutions in order to study ensure the consistency and reliability of the research. *Case 1 will be assigned to* ***Institution 1*** and *case 2 will be assigned to* ***Institution 2***. The data will be collected from the participatory observation, document analysis and an interview, which will be written up narratively. According to

Remenyi (2013:118), a narrative is produced by the researcher from the transcripts of the interviews, and the field notes from the observation and document analysis. The narratives tell a story of the two cases. All three research methods will be integrated in each case and, where relevant, thematic links will be made with Chapters 2, 3 and 4.

This study has adopted a qualitative approach. This approach deals with descriptions whereby the data are observed by the researcher or self-reported; in essence, the data are not measured precisely (Morra Imas & Rist, 2009:294). The qualitative paradigm is always trying to study human action from the perspective of the insider and the emphasis is on observation methods and analysis which "stay close" to the research subject (Babbie & Mouton, 2001:646).

Firstly, the relevant internal policies of both vocational institutions will be reviewed. The policies include the institutions' QMS. It is important to note that only policies that influence quality, quality management and quality assurance will be selected for document analysis. The study will also review whether an official QA process is documented by engaging with SOPs, or practically defined processes and requirements, and implemented throughout the institution with the intention of comparing the private institution's QA process with that of the public institution in order to outline similar trends as well as identify the differences. The document analysis together with the participatory observation will provide an indication in terms of whether the QA procedures and the practice of QA are aligned and filtered down throughout the institution. Olsen (2012:3) states that the document analysis process commences when documents are identified and selected according to their usefulness or relevance as data for the research at hand. At the end of each research tool, a summary table is provided which summarises the findings and makes the qualitative data more digestible.

Robson (2011:349, citing Krippendorff, 2004) defines document analysis as a technique which produces replicable and valid interpretations from texts for the contexts of their use. The method provides a window of opportunity by addressing numerous aspects of the research which move beyond the proximity of interviews and observations (Olsen, 2012:2). This research method will provide the study with secondary data. The document analysis and the participatory observation will go hand-in-hand with the interview in order to determine the alignment between QA policy procedures and QA practices within both institutions.

The participatory observation and the semi-structured interview provide the research with its primary data. A participatory observation of both institutions' QA process will be conducted. Yin (2014:240), describes participatory observation as a mode of data collection which requires the researcher to become involved in the activities being studied. The aim of this observation is to have first-hand experience of the QA processes in both institutions from beginning (i.e. the quality audit process) to the end (i.e. external moderation process). This process involves

(1) quality assuring and organising the administrative documentation for the learning programmes that are being exited (the documentation includes: attendance registers, learner feedback reports, facilitator reports, coaching and learner support forms, assessor reports, moderator reports, and the service-level agreement (SLA) between the institution and the client); (2) the next step is to analyse and evaluate the entire QMS for the external moderator; (3) preparing the portfolios of evidence for external moderator; and (4) conducting the external moderation. This observation will assist in determining whether the QA practice is aligned to the QA policy procedures. It will also allow the researcher to identify other individuals who contribute to or influence QA but are part of a different department within the two vocational institutions.

What's more, the observation will provide an opportunity to compare and contrast the QA practice in the public and private institutions by conducting the observation. This will allow the researcher to offer recommendations with regard to which process is absent or which process should be implemented in the institution's QA practice so that it is aligned with the policy procedure. Of course, within any institution efficient productivity is essential. But if it means slowing down the efficiency in order to have good compliant quality outputs, then the situation has to be accepted. Cain and Haque (2008:219) note that in the medical field assistive technology improves quality by decreasing the reliance on memory and increasing access to technology, so that compliance is increased by making use of best practice. Consequently, vocational institutions rely predominantly on paper-based systems, while technology is used for uploading learner progress onto the Learner Management System (LMS), or for uploading learner details along with their progress onto the relevant SETA's database.

Lastly, a semi-structured interview will be conducted with the employees of the QA department in the form of a questionnaire. This type of interview method is most suitable when the researcher or interviewer is thoroughly involved with the research process (Robson, 2011:285). The intention of the interviews is to determine how employees view QA and whether they understand the importance of QA as well as the risks which may not only impact on the QA process negatively, but may also impact on the institution negatively. In addition, the interview aims to determine whether other processes for improving the QA practice, but are not stated in the institution's policies, have been implemented institutionally.

At the end of the study the researcher assessed the research methodologies in order to determine whether M&E mechanisms are used in the QA practice as well as QA procedures, so that there is evidence of review and renewal of both policy and practice, thus reducing the likelihood of dormant policies.

5.3. STUDY SETTING

The study was conducted at two vocational institutions which are both located in the Western Cape province. The majority of Cape Town's vocational institutions are situated in the Central Business District (CBD) or in its outskirts, the public vocational institution that has been selected to participate in this study is located much further away from the CBD, more in the rural distract of the Western Cape. It has been strategically placed in order to accommodate learners within the district who are unable to afford tertiary education at a university because of, among other things, travelling costs. This institution has five learning centres in other regions of the country. The headquarters of the private institution which has been selected to participate in this study are located on the periphery of the CBD. Furthermore, it has a learning centre in the CBD itself with two learning centres located in the Gauteng province (one in Johannesburg's CBD and the other in Pretoria's CBD). Importantly, the private institution's vicinity, there are numerous public and private tertiary as well vocational institutions. Therefore, competitiveness within the education and training industry remains an on-going challenge in the private institution's district.

The norm would be to first discuss the data collection methods in detail. However, since the research study is completely anonymous, in order to provide the reader with more context for the study, the sampling as well as the coding will be outlined and discussed first. This will then be followed by a detailed outline of the data-collection methods.

5.4. SAMPLING AND CODING

Case studies are non-experimental and so random selection or control groups are not used (Morra Imas & Rist, 2009:271). Purposive sampling will therefore be appropriate for this study. Purposive sampling is also known as judgemental sampling. Babbie and Mouton (2001:643) describe purposive sampling as selecting a non-probability sample whereby the researcher chooses the units to be observed based on his/her judgement about which ones will be the most representative for the study.

Because of the competitiveness of vocational sector, especially for private institutions, this study will be entirely anonymous. What has also prompted this study to be anonymous is the confidentiality of policies as well as their uniqueness. As a result, pseudo codes will be used throughout the empirical study. The privately registered vocational institution will be coded ***Institution 1*** and its employees will be coded ***participant 1, participant 2, participant 3 etc.*** and the publicly registered vocational institution will be coded ***Institution 2*** whereby its employees will be coded ***participant 2, participant 3, participant 4 etc.*** in order to keep their identities anonymous.

5.5. DATA-COLLECTION METHODS

The research has three components. Morra Imas and Rist (2009:271, citing Patton, 2009), noted that data-collection methods for case studies can produce qualitative findings through in-depth interviews, direct participatory observations and document analysis. The annexure attached to this thesis include a copy of the interview schedule (Annexure A). This shows what questions were asked by the researcher. The data-collection methods are outlined below.

5.5.1. Document Analysis

According to Yanow (2007:411), documents may either substantiate or contest data obtained from an observation or an interview. The researcher is equipped with supporting evidence which can be used to either clarify or even challenge what is being read or told in the document review or interview (Yanow, 2007:411). Analysing the documents provided a framework for the research, as it gave the researcher insight into what should be observed when the practice of QA was taking place. The policies (i.e. the QMS) form an integral part of the institutions in that they govern how quality along with quality assurance is implemented throughout the institution. The documents are located at the headquarters of both institutions. It is important to note that these policies are not available in the public domain. However, there are guidelines, templates and frameworks which SAQA and the Education, Training and Development Practice (ETDP) SETA provides to vocational institutions. These policies are used for internal administration. Furthermore, the interview along with the participatory observation validates whether the QMS procedures are aligned to the practice of QA. The documents which have been analysed are outlined below.

a. ***Institution 1*** and ***institution 2*** Quality Management System. It is important to note that the QMS is made up of numerous policies to which the institutions have to adhere. As such, the researcher will review policies which influence and implement quality as well as quality assurance.

Table 5.1. The titles of policies reviewed.

Source:	Documentation Name:
Institution 1 policies:	- *Quality Management Policy* - *Quality Management Review Policy* - *Guideline for Providers: Designing and Establishing a Quality Management system.* - *ETDP SETA Generic Quality Management Template*

Institution 2 policies:	- *Quality Assurance Policy* - *Management Review Policy* - *Corrective & Preventative Action Policy* - ISO 9001:2015 Quality Manual Sample

5.5.2. Participatory Observation

Rosen and Underwood (2012:2) refer to observations as watching and recording the routine practices of certain behaviours during an occurrence of interest. Guest, Namey & Mitchell (2017:2) state that this method is used throughout the field of social science as well as public policy research and connects the researcher to the basis of human experiences by being an active participant, yet still fulfilling the role of a researcher by means of making notes, collecting images, making audio recordings and asking questions if the researcher does not understand the task at hand (Guest *et al*., 2017:2).

The aim of the participatory observation is to investigate whether the institution's quality assurance practice meets the quality assurance procedure of its Quality Management System. The focus of the observation is to explore whether there are checklists that are being followed within the quality assurance department as well as Education, training and development department: What happens if compliance information or documentation is missing? What happens if there is an error which SETA has made on its system? Are the management functions in place and is there accountability and responsibility? If there is an issue of risk, is QMS consulted for guidance. In the end, the overall aim is to investigate whether the quality assurance practice is standardised throughout the institution and to determine whether there is a quality culture. The observation will be conducted within the Quality Assurance department of both institutions; ***Institution 1's*** QA department is called Education and Training Quality Assurance (ETQA) and ***Institution 2*** is called the Quality Assurance Department. The researcher observed who was directly involved in the QA process as well identifying who was indirectly involved in the same process.

5.5.3. Semi-structured Interview

The interview was another data-collection method that helped the researcher achieve the objective of the study. A semi-structured interview was conducted with the employees of the QA department in the form of a questionnaire. This type of interview is most suitable when the researcher or interviewer is thoroughly involved with the research process (Robson, 2011:285). The intention of the interviews was to determine how employees view QA and whether they understand the importance of QA as well as the risk related to QA, if documents do not comply. In addition, the interview aims to determine whether other processes for improving the QA practice have been implemented that are not stated in the institution's policies. These processes

may include practices which the employees put in place for themselves in order to conduct a quality audit.

Appendix A provides the research schedule.

5.6. DATA ANALYSIS

Bazeley (2013:1) asserts that the foundation of analysis is based on our understanding of how the world works, what makes it what it is, and how we learn, along with understanding this world, and particularly, its people. From the time a research project commences steps are taken that will either aid or limit the researcher's interpretation and explanation of the occurrences being observed (Bazeley, 2013:1). In the light of the research methods, a suitable statistical procedure for sampling and coding needs to be chosen, so that the data can be analysed (Welman *et al*., 2005:210). Babbie (2010:394) points out that statistical analysis pertains to or rather is associated with quantitative analysis. Therefore, qualitative analysis is regarded as a method for exploring and investigating data of a social nature without converting it into a numerical format (Babbie, 2010:394; Bazeley, 2013:4-5).

Because the study is comparative in nature, analysing the data aims to achieve the goal of objective 5, whereby, the similarities and difference between ***Institution 1*** and ***Institution 2*** are compared and contrasted, so that recommendations can be made to both institutions in order to contribute to its quality enhancement. Investigating and comparing the similarities and differences will reveal common trends. These trends will then be analysed in order to determine what may have or may have not influenced these occurrences. This refers to a case-orientated analysis with the intention of understanding several cases by examining each case in detail (Babbie, 2010:395). The institutions will be labelled *Case 1* and *Case 2* so that it is easier for the reader to differentiate between the two institutions.

An organising framework has been developed so that the data can be analysed thoroughly. Because the research study is predominantly qualitative, it is often difficult to organise the data collected. Therefore, having an organising framework in place will assist in organising the data as well as writing up the findings along with determining trends. According to Suter (2014:18), an organising framework assists the researcher with communicating the findings and helps the reader to comprehend the analysis. The aim of organising frameworks is to make sense of data conclusively since reader is convinced by a data plan which is meaningful, well-structured and coherent (Suter, 2014:18).

It is crucial to note, that this organisational framework will be used in both institutions in order to ensure consistency and to reach the similar conclusions. The organising framework for this study will consist of the broad institutional set-up. This takes into consideration the roles and responsibilities of the QA department. Secondly, it will consider the internal policies of the

institution (only policies which specifically influence quality will be selected) as well as guidelines. Following this, the data which was collected from the institution's QA practice will be analysed. The intention is to analyse the QMS process from when it commences; this process involves (1) quality assuring and organising the administrative documentation for the learning programmes that are being exited (the documentation includes: attendance registers, learner feedback reports; facilitator reports; coaching and learner support forms; assessor reports; moderator reports; and the service level agreement (SLA) between the institution and the client); (2) the next step is to analyse and evaluate the entire QMS for the external moderator, (3) preparing the portfolios of evidence for external moderator and (4) conducting the external moderation. Lastly, a table will be compiled from the data that were collected from the document analysis, participatory observation and interview; it will be organised according to similar thought processes which were gathered from these research methods. The aim of the table is not only to assist the researcher in organising the data but also to determine the consistencies as well as the inconsistencies across all three research methods and how the inconsistencies are being managed within the institution.

5.7. ETHICAL CONSIDERATIONS

"Ethics concerns the morality of human conduct." (Edwards & Mauthner, 2012:2). As such, a researcher's ethical behaviour protects communities, individuals, workplaces and environments (Israel, 2015:2). Therefore, Babbie and Mouton (2001:527) and Edwards & Mauthner (2012:2) stress that the most important principle that directs the relationship between science and society is accountability. In terms of case studies, Remenyi (2013:172) has established that ethical approval may bring about unique challenges or limitations to researchers. The primary cause for this is the need to obtain organisational consent for the research along with the diversity of data the researcher may be offered through engaging with a wide range of knowledgeable informants (Remenyi, 2013:172).

In terms of this study, ethical clearance from the University's Research Committee was granted. However, it was granted with stipulations. This was because a permission letter from ***institution 2*** had to be provided to the Committee. In addition, there were requirements related to how the observation would be conducted. Nevertheless, all the requirements were provided to the Ethics Committee and approved. One key ethical issue was the anonymity of participants in the research study. Because both institutions are small to medium organisations, their Quality Assurance departments were rather small. As a result, this would have made it easy for employers and employees to identify the individuals within these departments. Given this, the researcher had to adjust the interview transcripts by removing the designation of the participants. Also, the data were analysed in such a sensitive manner so that no one in the institution felt victimised or threatened. As noted in Chapter 1, quality is not substantiated for

the purpose of judgement, but rather to discuss quality for the purpose of ascertaining best practices, thus, assisting the improvement of the institutions' QA through providing relevant recommendations.

The next chapter presents the findings of both institutions. This data is presented in a raw format, thus making it content rich. At the end of each research tool, summary tables are provided which outlines key findings of the study.

CHAPTER 6

RESEARCH FINDINGS

6.1. INTRODUCTION

This chapter presents the findings of the study. The data were collected through participatory observation of the quality assurance practices of ***Institution 1*** as well as ***Institution 2.*** Data were collected from the semi-structured interviews that took place with key informants of both institutions as well as the document analysis. The participatory observation and semi-structured interview were conducted at both vocational institutions, using exactly the same research methods in order to ensure fairness and consistency throughout the study. This chapter seeks to achieve the second last objective, namely the analysis and evaluation of the similarities and differences between the private and public vocational institutions' QA practice.

6.2. CASE STUDY 1: PRIVATE INSTITUTION (INSTITUTION 1)

As with most private vocational institutions, getting started in the industry of Further Education and Training (FET) is challenging. Yet walking into the first institution with the smell of fresh coffee brewing sparks your interest. It is not your typical private FET college which tends to have hospital-like floors or burglar-bar windows, or even groups of students, young and old, sitting outside because of the limited capacity inside. In fact, there were no students at all. This is because the facilitators train offsite. This was the headquarters. These premises provided a modern take on the future of education: a colour palette which is appealing to the eye, a welcoming receptionist who is eager to assist, a waiting area with a comfortable couch and chairs, and a cup of coffee, of course. As you make your way to the "production room" each wall is covered with principles that form the foundation of the institution and employees who are friendly and welcoming to an outsider. Notably, each department or team was clustered in their own sections, with telecommunication connections between these departments.

Finally, when one reaches reaching the quality assurance department, the four desks in the cluster no longer display the brown-wood colour, but were covered with various files and folders. Regardless of this systematic chaos, the dynamics of ***Institution 1*** need to be understood; this understanding included understanding the roles and responsibilities of personnel.

The literature review revealed that the provision for private tertiary education is made in niche areas, whereas public provision for these niche areas is either inadequate or absent. Not only does ***Institution 1*** have to comply with the requirements for establishing a private FET institution (i.e. financial sustainability; accreditation from UMALUSI; meeting as Occupational

Health and Safety requirements), they also have to work three times as hard in order to compete with public institutions. For this reason, it is imperative that private vocational institutions have a strong organisational structure, specifically in terms of management. Not only does the organisational structure need to be rigid, but so do the policies which govern the institution.

The next section presents the data collected from the document analysis, participatory observation and the interviews for both case studies. At the end of the account of the case studies, key data findings are summarised in tabular format, according to the research method.

6.2.1. Document analysis

The study reviewed ETDP SETA's (2012) Guideline for Providers: Designing and Establishing a Quality Management System together with its Generic QMS (2012). These policies are not only guidelines but can be used as templates by training providers. Essentially, the two policies are implemented by ETDP SETA's quality assurance department. The study also reviewed ***Institution 1's*** Quality Management Policy together with its Quality Review Policy.

6.2.1.1. Guideline for Providers: Designing and Establishing a Quality Management System

The policy guideline presents training providers with a broad framework of what *should* be in their QMS for the training institution. However, it is not limited to the three bullet points which are mentioned, in the guideline. There is more to a QMS than just policies, procedures and review mechanisms. Essentially, the policy guideline reminds training providers of the specific legislative requirements that ought to be adhered to. These requirements are enforced by SAQA. Irrespective, SETAs are under-going a shift in management by the QCTO. To date, the QCTO has not published official policy guidelines, specific to the QMS, for training providers.

The document analysis revealed that this policy guideline was developed to assist new training institutions with the development of their own QMS in terms of planning, so that these institutions can be accredited as a training provider. In other words, this document gives training providers a framework for the content which ought to be covered in each policy. A total of 29 policies makes up the QMS.

This guideline provides a broad explanation of the components as well as the role players of each section in the policies which are incorporated into the Generic QMS. Notably however, the guideline for providers does not have a clause or paragraph which explains this, nor does it explain the purpose of the guide. Furthermore, the guideline does not recognise the Generic QMS, when in fact it goes hand-in-hand with the Guideline for Providers. In effect, the guide merely outlines the relevant policies and procedures that make up the components of a QMS.

The policy document provides a vague definition of a quality management system. This definition includes 'quality development' as well as 'continuous improvement.' The definition stresses that policies and procedures should be people-orientated. The learner should always be the focus when designing the QMS. However, the document states that a QMS "assumes a quality culture" (ETDP SETA, 2012:8). This assumption implies that a culture of quality should filter down to all individuals who form part of the institution; this encourages personnel to be involved in both implementation as well as monitoring. The term "assumes" does not guarantee the existence of a culture of quality.

The document is then divided into two important requirements i.e. the first is the business system, which includes all operational policies, external and internal, along with HR, and the finance, maintenance and Information Technology (IT) policies; the second requirement is the training system. This system includes the policies which focus on the organisation's capacity to deliver as well as assess the desired education and training outcomes in a consistent manner. The final section of the guideline provides an explanation of these two systems and provides a table with elements of the QMS as well as the role-players. But these two sections provide only the headings or titles of each policy. Nowhere in the policy guideline is accountability addressed; only vague aspects of non-compliance are referred to.

6.2.1.2. Generic QMS

The Generic QMS supports training providers in terms of developing their QMS. This document is a template that can be downloaded from ETPD SETA's website. The template does not explain its purpose or why it should be used. Although, the template allows training providers to make changes according to the institution's needs and objectives; this layout is a control mechanism for conducting external moderations. On the other hand, it is assumed that this template is a requirement; providers use this format and layout, so that consistency as well as uniformity are maintained across all ETDP training providers.

Not only does the template provide a layout, it supplies providers with the exact wording which includes the purpose of the policy, its scope, references (i.e. cross-referencing of legislative documents), responsibilities as well as the procedure specific to each policy within the QMS. This allows providers to copy from the Generic QMS and paste the information into their own QMS. Providers are required to insert their institution's name in the assigned area and any other information which is relevant to their institution. However, the template is developed in such a way that providers are able to include their own processes and procedures. In essence, the Generic QMS can be adapted to the needs and objectives of the institution.

While reviewing this document, it was noted that the "Degree of Excellence" is promoted. This objective, which was introduced by SAQA, encourages institutions to conduct all activities systematically in line with the policies and procedures and legislative requirements; they are meant to be auditable as well as visible, and meet the needs of staff, students and stakeholders. The template promotes a culture of quality and emphasizes that quality is the responsibility of all staff members within the institution. Nowhere in the document is accountability addressed. This document is also somewhat vague, as implementation processes are absent.

6.2.1.3. Quality Management Policy

It is crucial to emphasize that ***Institution 1*** is accredited by three other SETAs together with the QCTO. Although ETDP SETA is their primary SETA, the institution's QMS has complied with the requirements of all four SETAs. Although the policy has a purpose, the policy statement has been omitted; not only does the policy statement include the purpose of the institution but also its aims and objectives. Notably, the International Standardisation Organisation (ISO) is referenced. However, this ISO version is outdated. Evidently, the institution does not wish to be accredited with ISO, as ISO is industry-specific, mainly engineering. This policy is viewed as the institution's "quality plan" which governs the day-to-day activities of the institution. Surprisingly, the business system is not included in the QMS.

Throughout the policy reference is made to the "quality objectives;" however, these objectives are not stated or explained. Emphasis is placed on "quality culture" and "continuous improvements." Yet, the manner in which they are to be implemented is vague. The notion of zero defects is encouraged by SAQA as well as the ETDP SETA and is filtered down throughout the institution.

The policy provides a process flow, but there is no caption or explanation of this diagram. A requirement checklist is also provided, yet, it fails to mention where in the QMS these requirements are defined. The policy has a section titled "Quality Management Criteria", which focuses on the criterion "Non-conformance and corrective measures." It states that documented procedures need to be in place in order to deal with issues or opportunities for improvement. However, there are no examples of non-conformance nor are there any examples of corrective measures procedures or mechanisms.

Overall, this policy reflects the vagueness from the ETDP SETA's Guideline for Providers as well as the Generic QMS. There is no discussion of accountability, although responsibility is addressed, but by definition these two terms refer to different aspects.

6.2.1.4. Quality Management Review Policy

This policy was recently developed. It is the only version. It is unclear whether this policy has been implemented, as it still awaits comment. An accountability clause is omitted from this

policy. Although it states who is responsible for reviewing the policy, responsibility and accountability do not have the same meaning. The policy mentions non-conformance and both policies state that there is a process in place which identifies non-conformance, yet this process is not stated in either policy. The policy is rather vague, in that it does not describe processes for corrective action nor does it provide employees with examples of non-conformance along with the appropriate corrective measures.

Table 6.1. provides a short summary of the document analysis findings. This has been compiled so that the qualitative data in the study are more accessible for the reader.

The analysis notes similar trends within the four policies for ***Institution 1.*** These trends will be discussed in the final chapter and recommendations will be provided which pertain to these trends. After the document analysis, the participatory observation is discussed below.

The table below provides a short summary of key findings within this section:

Table 6.1: A summary of the document analysis findings.

Documents Reviewed:	**Findings**
I. Guideline for Providers: Designing and Establishing a Quality Management System	• A broad framework of what *ought* to be in a training in a training institution's QMS was provided. • All the ETDP policy documents are outdated, which questions their relevance and whether they are still applicable. • The purpose of the guide is unclear. • The QMS is more than just policies, procedures and reviews. • The document reminds providers of the legislative requirements that should be adhered to, which SAQA implements. • This document supplies training providers with the QMS's content framework and is made up of 29 policies. • The guide provides a broad explanation of the components within the QMS along with the role-players. • This policy does not recognise the Generic QMS, although both documents ought to be used in tandem. • A vague definition of a quality management system is provided. Reference is made to "quality development" and "continuous improvement" and there is a key focus on being "people-oriented." • The guide assumes that a quality culture will be in place. This does not guarantee that a culture of quality will be implemented in the institution. • The document is divided into two sections: (1) the business system and (2) the training system. These two systems make up the QMS. • Accountability is not addressed, and aspects of non-compliance are referred to vaguely.
II. Generic QMS	• This document is a template which providers can download from ETDP SETA's website. • It supports providers in terms of developing their QMS.

	• The purpose of this template is not indicated nor how it should be used. • The layout of the document is used as a point of reference when external audits take place. • Providers can adapt the template to their business needs. • Not only does the template provide a layout, providers are allowed to use the exact wording which is provided. • This template promotes the notion of "Degree of Excellence" i.e. zero-defects together with a culture of quality. • The document stresses that quality is the responsibility of all staff members within the institution. • Similar to the *Guideline for Providers*, the issue of accountability is not addressed. • This template can be viewed as an enabler of vagueness; implementation processes are omitted.
III. Quality Management Policy (***Institution 1***)	• The institution is accredited with three other SETAs as well as the QCTO. • ETDP SETA is its primary SETA and the Institution's QMS has to comply with all four of SETA's requirements. • The purpose of the policy is stated, but a full policy statement is omitted. • The policy references ISO, yet the version is outdated. The institution does not wish to be accredited with ISO. • The QMS is the institution's "quality plan" which governs its day-to-day activities. • If the QMS is viewed as a whole, it emerges that certain policies of the QMS's business system are omitted. Employees have limited access to these policies. • The policy refers to "quality objectives", but no quality objectives are listed in the document. • An emphasis is placed on "quality culture" and "continuous improvement." Yet their implementation is vague. • Zero-defects are encouraged, which is unrealistic. • A process flow is provided, but no caption or explanation of the diagram is provided. • A section is dedicated to "Quality Management Criteria" and focuses on non-conformance and corrective action, stating that documented procedures need to be in place in order to deal with issues or improvement opportunities. • No examples of what constitutes non-conformance are provided.

	• Throughout the policy it is evident that the vagueness of ETDP SETA's Generic QMS filters through the entire document. • Although responsibility is addressed, aspects of accountability are omitted.
IV. Quality Management Review Policy (***Institution 1***)	• The policy was recently developed. • It is unclear whether the policy has been implemented, as it still awaits comments. • There is no accountability clause. • Although non-conformance is addressed in the QMS policy and in this document; a process or procedure for dealing with non-conformance has not been provided. • The policy is vague in terms of explaining and providing well-documented processes. • No examples of what constitutes non-conformance are provided.

6.2.2. Participatory Observation

The participatory observation entailed assisting **Institution 1** prepare for its external moderation with SERVICES SETA. The researcher was taught the process of how to conduct the quality control audit.

The preparation included cross-checking the Learner Achievement (LA) numbers with the projects and ensuring that the assigned number is correct. These LA numbers are produced by SERVICES SETA's indicium system. Whilst cross-checking the projects, the same LA number was given to two different projects. This discrepancy stemmed from SETA and not the institution. These two LA numbers were highlighted for the external moderator's attention. The next process involved quality controlling the client files in order to ensure the necessary documents were in place. Each client file was a different project for a specific client, according to the training year.

The client file contained the Service Level Agreements (SLA) between the institution and the client. The file also contained attendance registers, learner feedback forms, facilitator reports which are given to the client which provides feedback and comments of progress to the client, assessor reports as well as moderator reports. These documents constitute the compliance documents.

At the time of preparing for the audit, the institution was short of staff. As a number of employees within the training department were either on training sessions or conducting training sessions. It was observed that the compliance documentation was filed in a disorderly way. All the projects for a specific year and specific client were filed in one file and not sorted in an organised manner. This made it challenging to find the correct compliance documentation for the specific project, which was being moderated externally. It was also evident that there were inconsistencies with all the client files in terms of the way in which compliance documents were filed. This resulted in attendance registers not being filed chronologically; facilitator reports were not placed in the files; these reports were only printed and filed when the internal quality assurance audit took place. It was also noted that audit schedules were not at hand whilst conducting the quality audit.

What's more, there were old client files that could not be accounted for. In order to comply, two client files were compiled with copies of the compliance documentation. While conducting the institution's quality process, it was observed that management was not responsible or held accountable for discrepancies that occurred. Before the institution expanded, each facilitator had a certain project and was responsible for that specific project along with its client file. Since the institution's growth, the Education, Training and Development Department took over all client files. It was a matter of "fixing" these discrepancies so that the verification could be

approved. Nevertheless, all the necessary documentation was accounted for, internally audited and ready for the external moderation to take place.

On the day of the external moderation, the external moderator asked the institution to pull the files. This should have been done by the moderator. However, due to limited time the moderator was unable to do so, as the moderator came from Johannesburg, as SERVICES SETA's Head Office is in Johannesburg. Regardless, the best files could have been selected by the institution. It is important to note that the external moderator was not observed directly. This observation occurred whilst all the selected files were unpacked into the designated moderation area.

The moderator was overwhelmed with the 28 projects; it should have been 30 projects, but it was not planned for the other 2 projects to be exited. In this regard, "exited" and "verification" means the project has m*et al*l SETA requirements and learners will receive a certificate for completing the learning programme successfully. Observing the moderator's expression, whilst packing the files, it was clear that the moderator was overwhelmed, and time was certainly a limitation. All the compliance documents were pulled out of the client files and placed on top of the portfolios of evidence, which the moderator requested us to do. This process should have been done by the external moderator – in order for the moderator to moderate the order in which the documents were filed. The moderator was rather arrogant and condescending. When the moderator asked for information, the moderator would ask questions as if the documentation or processes were incorrect.

It was overheard that the institution's policies are vague and "too pretty." Processes with regards to how procedures were to be implemented were missing or were not stated in the policies. I was informed that each external moderator has his/her own preferences. Often the QMS is not looked at because the moderator has seen it before. To some extent the moderator "trusts" the institution's processes and procedures.

Regardless, all 28 projects were verified and exited along with the other 2 projects that were not marked for verification. It was evident that quality does not lie within the units of the institution, but rather relates to functions. The problem lies at an institutional level. There are generic trends that are not specific to quality practices. As such, quality is not being driven, it is pushed through in order to meet the necessary requirements for "meeting the standards" of verification.

This process is the institution's quality assurance process specific to SERVICES SETA. It is important to note, that with each SETA, the institution has a specific quality assurance process according to that specific SETA's requirements. Each SETA has specific requirements for external moderations which the institution ought to follow accordingly.

Table 6.2. provides a short summary of the participatory observation's findings. This has been compiled so that the qualitative data within the study are more readily accessible to the reader. The document analysis, the participatory observation and the interview provide an understanding of the QMS from the participant's perspective along with their knowledge of the QMS, quality and a quality culture.

The table below provides a short summary of key findings within this section:

Table 6.2. A summary of the participatory observation's findings

	Findings
Observation	• The compliance documents were prepared for the external moderation of Services SETA. • 28 projects were being exited. • Learner Achievement (LA) numbers were crossed-checked with each project. • The same LA number was given to two different projects. This was a technical error produced by Services SETA's learner management system. • The institution's client files were quality controlled to ensure that the required compliance documents are in place. • The quality audit and control procedure were verbally explained. A checklist was not provided, which made it difficult to determine whether all the compliance documents were correct. • The researcher made notes of what compliance documents were required and had to refer back to the note if necessary. • Each file was a different client and the files contents consisted of: - Service Level Agreements - Attendance registers - learner feedback forms - facilitator reports - assessor reports - moderator reports These documents together with the learner's POE are the compliance documentation. • The client files were filed disorderly, as all the projects for the specific year were filed in one file and led to confusion and a great deal of time was wasted in finding the correct documents.

	• There were inconsistencies between the client files in terms of the compliance documentation's filing order. Often, the order did not correspond with the table of contents in the front of the file. • Two client files were not accounted for. • In order to comply with the external moderation requirements, the client files were compiled with copies of compliance documentation. • This was a matter of "fixing" the discrepancy so that the verification can be approved. • The external moderator requested that the institution pulls learner POE's. This task had to be conducted by the external moderator. • Time was a limitation as the external moderator came from Johannesburg. It was evident that he was overwhelmed by the number of learners POE's which needed to be exited. • The moderator requested that all the compliance documents had to be pulled and placed on top of the POE's for each project – a quality audit practice which the external moderator should have done so that the client files are moderated too. • The external moderator became intimidating when questions were asked. • It was overheard that the institution's policies are vague and "too pretty" and implementation processes were lacking. • Often moderators do not review the QMS as they are familiar with the institution and "trusts" the institution to an extent. • All 28 projects were exited together with two other projects that were not ready for verification. • Evidently, quality does not lie within the units of the institution, rather it relates to functions. • Quality is not being driven within the institution, instead it is being pushed in order to meet the necessary requirements, i.e. "meeting the standards."

6.2.3 Interview

The study included an interview schedule for participants to answer. If elaboration of a question was needed, the researcher explained the question to the participant. If the participant required further elaboration, the researcher would ask the question in a different way.

6.2.3.1. Profile of the Participants

Because the study was anonymous, participants were asked not to fill in their gender, age or designation, which would have made them identifiable. The population includes all employees within ***Institution 1***. A purposive sample was drawn to include all individuals in the Quality Assurance Department based on employee's knowledge. The researcher also learnt that this department is called the Risk and Compliance Department. There were 4 participants equated and their average work experience in the QA department was two years. The number of years of work is an indication of the participants' understanding and knowledge of QA. However, it is important to note that the majority of the participants were newly appointed in their roles.

6.2.3.2. Theme: Quality Awareness of the Institution's Employees

The sample was asked a series of questions which pertained to the awareness of quality of ***Institution 1***'s employees. On the question of whether the department requires more people to assist in its day-to-day activities, all the participants answered *No.* Each participant had a similar answer:

> *"There is sufficient staff to manage daily activities. Each staff member understands their area of responsibility and deliverables. There are expectations that do arise during the course of the business, where additional assistance is required. But, this is an exception" (Participant 1, 2018).*

The question was posed to determine whether the QA department has the capacity to prepare for external moderations. As observed in the participatory observation, there were 28 projects due for external moderation and five to six Portfolios of Evidence were pulled for verification.

Following this, the question on how many colleagues at the institution's other sites are linked to or are involved in the QA process. The purpose of this question was to identify the QA department's knowledge of how many stakeholders assisted in the QA practice. The participants' answers varied. Participant 3 answered the question according to how each project is quality assured. Participant 3 stated that there are only "*5 individuals involved in the QA process."* Participant 4 stated that "*Each site has a maximum of 4 people which are involved in the QA process"* whereas, Participant 2 explained that:

> *"We have many internal stakeholders that depend on us and many that we depend on as well" (Participant 2, 2018).*

Participant 2's answer was supported by Participant 1's answer to the question. Participant 1 elaborated that:

> "*There are ± 8 staff members. The administrators at the other sites quality assure the portfolios before they are exited through an external moderation" (Participant 1, 2018).*

The next question asked how they would rate the organisation's overall awareness of risk, if the quality standard was not met. Four out of the five participants rated the organisation's overall awareness as a rating of 5, which had a description of "critical" linked to it. Participant 3 provided an example as an answer. The participant explained that:

> "*Should a portfolio go missing or data does not correspond with [the] final summary reports, LMS [Learner Management System] and [the] moderation reports. It could affect the external audit. Thus, the organisation's accreditation could be affected."*

The participant's answer provides an example of the various forms of documentation which form part of the institution's internal audit as well as the external audit, as noted in the participatory observation. Participant 1 emphasized:

> "[The organisation] *prides itself on delivering quality training and skills development. Any risk or perceived risk to the organisation's credibility is dealt with and any deviations are corrected."*

Participant 2 explained:

> "*Since the ETQA manager has joined the company,* [it is] *demanded that all Quality Assurance expectations are met without fail."*

Surprisingly, Participant 4 interpreted the question differently. The participant rated risk as 2 with a description of "minimal". Participant 4 explained that:

> "*Because we* [are] *under the QA department, we are very aware of risk if the quality has not been met. However, if someone is being asked to assist in the QA, then we must ensure we double check his/her work."*

The final question in this theme asked participants whether they think more people within the organisation should be more aware of the importance of QA. All the participants were in agreement and answered "Yes." However, Participant 3 emphasized that:

> "*Yes, people in the organisation should not just be aware. But should practice QA effectively in order for me, as an administrator, to verify* [that] *we meet compliance standards to have a successful external audit (moderation)."*

Participant 3 explained that:

> *"Most people are aware, however, not sure everyone is happy to abide by the rules. Not sure if it is a power struggle or just pure laziness."*

Participants 1 and 4 elaborated that:

> "*The QA process impacts the entire organisation. Anything that places the accreditation of the organisation at risk means that there is a gap/shortfall in the QA process" (Participant 1, 2018).*

Participant 4 emphasized:

> *"In order for the institution to grow, compliance work must be accurate, which is why people in the organisation needs to be aware and know the importance of QA."*

This question was posed to establish how the QA department views the entire institution's perception of QA along with its importance.

6.2.3.3. Theme: Institutional Quality Assurance

The questions in this theme were asked in order to determine the participant's own knowledge and understanding of QA. In order to determine this, the research asked questions which pertained to the basics of quality and its components which relate to quality assurance and the QMS.

On the question of whether the participants were aware of the existence of the institution's QMS, all the participants in the sample answered Yes. The participants were then asked whether they received any further orientation on this policy during their time at the institution. Three out of the four participants stated that they have not received orientation on the QMS. Participant 3 was unable to explain why orientation did not take place, whereas Participant 2 explained:

> *"My Manager has touched base with us on the QMS. We are to familiarise ourselves with the QMS."*

Participant 4 explained that "*I have not received any orientation on the policy, but I am aware that there is one in the institution."*

Participant 1's answer has been omitted; the question was answered in such a way that it puts the participant's identity at risk. As a result, the researcher decided not to include the participant's response, as this study is anonymous.

The next question was asked in order to investigate the participants' understanding of a QMS. Once again, only three out of the four participants in the sample were able to answer the

question. All three participants had a similar answer in terms of achieving goals and meeting customer needs. Participant 1's answer explains that:

> *"[It is] a set of policies and procedures that allows a training provider to set and deliver achievable goals and improves in this over time. The QMS is an integrate of an organisation's culture and wants practice in pursuit of continuous improvement. It is a commitment of the organisation to deliver quality to meet the learner needs and to ensure client satisfaction. A true measure of a robust QMS are successful external moderations/monitoring."*

Participant 2 provided this explanation of the QMS:

> *"The QMS ensures that we deliver quality products and services to our clients. Ensures continuous improvement of our products. Ensures that we do a root cause analysis once any deficiencies are identified. Ensure that all key players deliver a high-quality product and service to our clients. Interdepartmental synergy and teamwork are maintained."*

The researcher noted that the answers to this question was Googled in that Participant 1's answer is reflected in the ETDP SETA's *Guideline for Providers: Designing and Establishing a QMS* and Participant 2's answer is reflected in the Kaizen method.

Participant 3's answer shows the participant's own understanding of a QMS:

> *"My understanding of* [a] *QMS is about the policies, procedures and processes of a business. It stresses quality assurance and meeting client requirements where I have to ensure the organisation is compliant in order to get accreditation."*

The participants were asked whether their institution has a hard copy or a soft copy of the QMS. The question was asked in order to determine how well the participants knew where the QMS is located. The participants were also asked to provide the exact location of where the QMS is stored, for the hard copy as well as soft copy. These questions were posed in order to determine whether the QMS is accessible to all staff and to identify whether a culture of quality is implemented through its accessibility. Participant 4 indicated *Not sure,* whereas, Participants 2 and 3 indicated that there is only a *Soft copy* and Participant 1 indicated that there is both a hard copy as well as soft copy of the QMS. In terms of the exact location of the QMS, Participants 1, 2, and 3 stated that the QMS is on the Institution's QMS Policies and Procedures Drive. Participant provided an exact account on where to find the soft copy:

> "*Share Driver/ Policies and Procedures (P-Drive) Archive QMS Policies/ Policies May 2017/ Quality Management Policy."*

Notably, the location of the QMS hardcopy could not be provided by Participants 2, 3 and 4. Participant 3 stated "*Not that I am aware of"* and Participants 2 and 4 did not answer the

question. However, Participant 1 stated that the hardcopy of the QMS is "*filed in the ETQA Manager's Office."*

The final question in this theme pertains to responsibility for the QMS. The participants were asked whether they knew who is responsible for amending and implementing any changes to the QMS. Once again, only three out of the four participants were able to answer the question. Participants 1 and 2 stated that the ETQA Manger is responsible for amending the QMS: "*The ETQA manager reviews the QMS annually and updates it in line with any legislative changes and/or company improvements" (Participant 1, 2018).*

The question was asked whether individuals in the institution were made aware of any changes to the QMS. Participant 1 indicated, "*Yes, the organisation is aware that the QMS is updated annually. Any changes are communicated to the relevant parties via email."* Surprisingly, Participant 4 did not answer the question. Participant 2 said that "*The updated version is saved onto the share drive and yes, we are advised*. However, the participant did not state how or with whom the amendments are shared with. Participant 3 said, "*Yes, we are made aware of amendments and advised by means of receiving a report."*

6.2.3.4. Theme: QA Systems and Processes

The series of questions in this theme was asked in order to establish the processes which the institution uses when conducting a quality audit. This theme investigates whether the quality audit is standardised throughout the institution.

The participants were asked whether there are standard operating procedures/processes which are followed when conducting a quality audit. All the participants in the sample agreed that a standard operating procedure/process is followed. Participant 2 explained that: "*Yes, we all follow the same set of rules and procedures."* The participant continued by describing the process which is used.

> *"*[We] *check: all* [the] *pages are initialled by the learner as well as the assessor. There's a formative and a summative file. That the FSR* [Final Summary Report] *matches the ESR* [Evidence Summary Report]. *That the FSR is filed in front. If the learner has dropped off, that a termination letter is filed."*

Participant 3 explained that "*There are processes in place which I follow. All documents should be authentic, certified. Learning programmes should be initialled by the learner and assessor and all reports to be dated and signed and should match the results* [of the] *ESR and FSR together with a result tracker. All this information then gets captured to the LMS.*

However, Participant 4 stresses that each project has different processes which are used.

"There is a procedure that we follow when doing a quality audit and also it differs, because we deal with various projects for various clients and therefore [there] *are often slight changes in the documentation of each client, but each project has its own procedure that you must follow"*

Evidently, for each project there is a specific process or procedure that is followed. Participant 1 states that:

"*Standard checklists have been developed to assist with the quality assurance of portfolios of evidence. Once the QA process has been completed the checklist is signed by the relevant party. The compliance and risk unit also conduct a random QA of a percentage of file before external moderation."*

This question was followed with a sub-question: whether the procedures/processes mentioned in the previous question are official institutional procedures/processes. An interesting finding was that three out of the four participants indicated that they were not sure. Participant 1 answered yes.

What's more, all three participants did not answer the next question, which asked them to provide the policy's or instruction guide's name. Participant 1 stated *"Please refer to the QMS index; process flows are available that explain the steps* [and] *assessors, facilitators and moderators undergo an orientation."* Because Participants 2, 3 and 4 were not sure whether the processes were official institutional procedures, they were asked to explain how they were taught or showed how to conduct the quality audit. Participant 3 referred the researcher back to question 3.2.; however, participant 4 explained that:

"I was taught through verbal communication, then I would make notes for myself so that in the next quality audit, I would refer back to those notes."

Participant 2 explained that "*We have a workshop on what is expected and what we need to look for."*

The next question asked participants whether they follow a checklist to ensure that all the documents are in place. All the participants in the sample answered yes. The participants were asked whether this checklist assists in making sure that the quality meets the required standards and whether it assists in making the process easier. Again, all the participants answered yes. However, only Participant 1 and Participant 3 provided a reason for their answer. Participant 3 stated that:

"W*ould ensure the quality meets the requirements for a successful external moderation."*

Similarly, participant 4 explained that:

> "*At a glance, one is able to check if all compliance aspects of the checklist have been met. The checklist is also used at different stages (1) on commencement; (2) mid-term [and] (3) final."*

The next question asked participants for their opinion on whether the quality process is standardised throughout the organisation. Participant 2 stressed that "*It is standardised in the ETQA Department. I am not sure if it is standardised throughout the organisation."*

Participant 3 noted that: *"The quality processes are the same throughout, but I still need to verify the QA in order for a successful external moderation to take place."*

Table 6.3. provides a short summary of the interview findings. This has been compiled so that the qualitative data within the study are more accessible to the reader.

The next section provides the analysis of Institution 2. The research method used for Institution 1 has been applied in the same way for Institution 2.

The table below provides a short summary of key findings within this section:

Table 6.3. A summary of the interview findings.

Theme	Questions:	Findings
Participant Profile	1. How long have you worked in the QA department?	• Given that the study was anonymous, participants were asked not to fill in their gender, age and designation. • The number of participants in the study was four. • The participants had an average experience of two years in the quality assurance department.

Quality Awareness of the Institutions Employees	1. Does the department require more people to assist in its day-to-day activities?	• All the participants answered no. • *"There is sufficient staff to manage daily activities. Each staff member understands their area of responsibility and deliverables. There are expectations that do arise during the course of the business, where additional assistance is required" (Participant 1, 2018).*
	2. How many colleagues, at the institution's other sites, are linked to or are involved in the QA process?	• All the participants provided answers between 4 and 8 administrators.

	3. How would the organisation's overall awareness of risk be rated, if the quality standard was not met?	• Four out of the five participants rated the organisation's overall awareness as 5, which had a description of "critical" linked to it.
		  • "[The organisation] *prides itself on delivering quality training and skills development. Any risk or perceived risk to the organisation's credibility is dealt with and any deviations are corrected."*
		• One participant interpreted the question differently. The participant rated risk as 2 with a description of "minimal".
		  • "*Because we* [are] *under the QA department. We are very aware of risk if the quality has not been met. However, if someone is being asked to assist in the QA, then we must ensure we double check his/her work."*

	4. Should more people in the organisation be aware of the importance of QA?	• All the participants agreed and answered yes. "*Yes, people in the organisation should not just be aware. But should practice QA effectively in order for me, as an administrator, to verify* [that] *we meet compliance standards to have a successful external audit (moderation)."*

Institutional Quality Assurance	1. Are you aware of the existence of the institution's QMS?	• All the participants in the sample answered Yes.

	2. Did you receive orientation of this policy, whether it was since or during their time at the institution.	• Three out of the four participants stated that they have not received orientation on the QMS.
		  ○ *"My Manager has touched base with us on the QMS. We are to familiarise ourselves with the QMS."* This is stated in the contractual agreement between the employee and employer.
		  ○ "*I have not received any orientation on the policy, but I am aware that there is one in the institution."*

	3. What is your understanding of a QMS?	• Once again, only three out of the four participants in the sample were able to answer the question. • Interestingly, all three participants had a similar answer in terms of achieving goals and meeting customer needs. ○ *"*[It is] *a set of policies and procedures that allows a training provider to set and deliver achievable goals and improves in this over time. The QMS is an integrate of an organisation's culture and wants practice in pursuit of continuous improvement. It is a commitment of the organisation to deliver quality to meet the learner needs and to ensure client satisfaction. A true measure of a robust QMS are successful external moderations/monitoring."* • The researcher noted that the answers to this question were Googled. Participant 1's answer is taken from the ETDP SETA's *Guideline for Providers: Designing and Establishing a QMS* and Participant 2's answer is reflected in the Kaizen method. • One participant stated that they were not sure. • Two participants stated that there is only a soft copy.

	4. Does your institution have a hard copy or a soft copy of the QMS? 5. Please provide the exact location of the QMS, for both the hard and soft copy. 6. Do you know who is responsible for amending and implementing any changes to the QMS? 7. Are employees notified of these changes?	• One participant said that there is a soft and hard copy. • Three participants stated that the QMS is on the Institution's QMS Policies and Procedures Share Drive. • In terms of the hard copy, only one participant was able to provide its exact location "*Filed in the ETQA Manager's cupboard."* • Only three out of the four participants were able to answer the question. ○ *The ETQA manager reviews the QMS annually and updates it in line with any legislative changes and/or company improvements" (Participant 1, 2018).* • Three out of the four participants were able to answer the question. • One participant stated "*Yes, the organisation is aware that the QMS is updated annually. Any changes are communicated to the relevant parties via email."*

QA Systems and Processes	1. Are there standard operating procedures or processes which are followed when conducting a quality audit?	• All the participants in the sample agreed that a standard operating procedure/process is followed. ○ *we all follow the same set of rules and procedures." ... "*[We] *check: all* [the] *pages are initialled by the learner as well as the assessor. There's a formative and a summative file. That the FSR* [Final Summary Report] *matches the ESR* [Evidence Summary Report]. *That the FSR is filed in front. If the learner has dropped off, that a termination letter is filed."* • One participant stressed that for each project (under a specific SETA) different audit processes are used
	2. Are the procedures or processes official institutional procedures/processes?	• Three out of the four participants indicated that they were not sure. • However, one participant stated yes, there is.

	3. Do you follow a checklist to ensure that all the documents are in place?	• Three participants were unable to answer this question.
		• One participant referred the researcher to QMS's Index page.
		• No checklists or guides were found.
		• The three participants were asked to explain how they were taught or showed how to conduct the quality audit.
		  ○ *"I was taught through verbal communication, then I would make notes for myself so that in the next quality audit, I would refer back to those notes."*
		  ○ *We have a workshop on what is expected and what we need to look for."*
		• All the participants agreed and said yes.

	4. Does the checklist assist in making sure that the quality meets the required standards and whether it assists in making the process easier?	○ "W*ould ensure the quality meets the requirements for a successful external moderation."* ○ *At a glance, one is able to check if all compliance aspects of the checklist have been met. The checklist is also used at different stages (1) on commencement; (2) mid-term [and] (3) final."*
	5. In your opinion, is the quality process standardised throughout the organisation?	• Participants were unsure and stated: ○ "*It is standardised in the ETQA Department. I am not sure if it is standardised throughout the organisation."* ○ *"The quality processes are the same throughout, but I still need to verify the QA in order for a successful external moderation to take place."*
	6. In your opinion, what can be done to improve the organisation's quality assurance process?	• All of the participants said *"There is none"*

6.3. CASE STUDY 2: PUBLIC INSTITUTION (INSTITUTION 2)

To date, there are 50 public vocational institutions which are registered and accredited in South Africa. Six of these institutions are in the Western Cape. Similar to ***Institution 1***, public vocational institutions are "new" to South Africa's higher education industry and are in constant flux as a result of government influence. With that being said, ***Institution 2*** is the oldest public vocational institution in the Western Cape.

Institution 2's headquarters were newly built premises and so were its campuses. The Institution has a modern rustic design. The new building did not mirror the appearance of the one on Google Maps. The receptionist was welcoming and wiling to assist in the matter at hand. While waiting to meet the participants, the institution's mission, vision and values were noticed, as these objectives were mounted on the wall. This provided a clear perspective on the institution's desired goals for its students, employers, community members and all individuals visiting. Whilst we were walking through the building, we noted that each department was divided into its own section. These departments ranged from Finance, Design and Development to Corporate Services etc. Notably, the number of employees at Head Office was greater than that of ***Institution 1.*** It was observed that ***Institution 2*** provides community members in its vicinity with employment

The dynamics of ***Institution 2*** needed to be understood as well as the roles and responsibilities of personnel. Currently, ***Institution 2*** has a number of vacancies within the organisation. The positions of Quality Assurance Manager and Academic Manager (Occupational) are vacant. These two vacancies are critical gaps within the institution.

It is crucial to note, although ***Institution 2*** offers occupational qualification, which are mainly offered as NQF Full time, learnerships or apprenticeships, they also offer NATED/Report 191, National Certificate Vocational (NC(V)), as well as National Higher Certificates. Both qualifications are "delivered under the auspices of DHET and quality assured by UMALUSI" (TVET Colleges South Africa, 2018). Given this, ***Institution 2*** has to comply with the requirements for establishing a public TVET institution. The institution has to comply with the requirements of ISO and the DHET, who are their primary QCTO, as well as UMALUSI and SETA. Similar to ***Institution 1,*** Public TVET institutions also have to work three times as hard in order to compete with the prominent public academic institutions in the province. For this reason, it is imperative that public vocational institutions have a strong organisational structure, specifically, in terms of management. Not only does the organisational structure need to be rigid, but so do the policies which govern the institution.

The next section presents the data collected from the document analysis, interview and participatory observation. It is important to note that the participatory observation did not take place, which has been highlighted in section on the limitations of the studies.

6.3.1. Document analysis

Initially, the researcher planned to review the same policies for ***Institution 2*** as those of ***Institution 1.*** However, it came to the researcher's attention that ***Institution 2*** does not follow the Generic QMS template of ETDP SETA, even though the institution meets the criteria to an extent. Instead, ***Institution 2*** adheres to the policy requirements of ISO, specifically ISO 9001:2008, which is a DHET requirement. Given this, ISO's quality manual template sample will be reviewed; however, the entire document is not available in the public domain, but only a section of the template is made available to the public. This challenge is noted in the Limitations. Further, the institution's policies are also reviewed, namely *Quality Assurance policy; Internal Audits; Corrective & Preventative Action; Management Review; Control of Non-Conforming Services and Control of Records*. Each department has processes which they follow. These processes along with forms and templates are stored on the institution's server where the QMS is located.

6.3.1.1. ISO 9001:2015

Given that access to the ISO's *Quality Manual* is limited, the content page was reviewed. The Quality Manual is divided into 10 sections. These sections include, The QMS; *Governance and Leadership (i.e.* Leadership commitment*), Role, Responsibility and Authorities; Communication; Management System Planning (which focuses on Quality Objectives); Support (with a focus on monitoring and measurement tools as well as organisational knowledge); Customer Requirements; Product and Service Development (emphasis is placed on control of Non-Conforming Outputs); Performance Evaluation (pertaining to monitoring, internal audits and management review);* the final section is *Improvement (which focuses on Non-Conformity & Corrective Action).* Essentially, these sections provide an outline of the content which ought to be in the institution's QMS.

This document allows institutions to populate their institutional information into the document template, Similar to the ETDP SETA's Generic QMS Template. Throughout the Quality Manual there are indications for the policy writer to insert institution specific content. Although the document introduces the QMS, the purpose statement of the Manual does not exist. Furthermore, the 10 sections within the document are not referred to as 'policies.' The Quality Manual Document references relevant standards and customer specification may be highlighted. To an extent, this document can be classed as having the same requirements as the

Generic QMS (2001) i.e. the business system and the training system. Yet in terms of the training system, only *Design and Development* is relevant in this regard.

Whilst reviewing the document, it was evident that ISO encourages institutions to use SWOT and PESTLE analysis so that the institutional strategy is aligned to these analytical methods. An interesting finding was that key performance indicators (KPIs) are used in order to link the objectives for controlling and monitoring institutional processes. A great emphasis is placed on risk and is carried out in the four available sections of the document. Surprisingly, the document fails to influence the culture of quality within the institution. Instead, a greater focus is placed on risk and corrective action as well as improvement.

6.3.1.2. Quality Assurance Policy

The policy structure of ***Institution 2*** contrasts vastly with that of ***Institution 1***. One significant variance is the different focus on responsibility. The researcher noted that the Chief Executive Officer (CEO) is the person primarily responsible for the QMS, followed by the QA Manager. The policy provides individuals with a table which indicates the policies, procedures, guidelines and forms which emanate from the QMS. The version of this policy is Revision Number 002, but a description of revisions is absent. The Institution provides the objectives of the QA Policy which are underpinned by SAQA. What's more, the QMS states how this quality system should be applied throughout the entire organisation along with the individuals who form part of its practice. Importantly, the policy emphasizes that commitment, involvement and effective interaction are required from all personnel. An interesting finding within this policy was that the QA manager is responsible for conducting all quality processes, including academic and non-academic.

The policy also has a "legislative context" whereby the legislation that is applicable to the institution is referenced. The policy also provides definitions for a quality management system, quality assurance, quality audits as well as quality control. Notably, however, these definitions are derived from SAQA's *QMS for Training Providers.* Yet the Institution's QMS model is based on UMALUSI, Western Cape Education Department, DHET and is aligned to all the ETQAs. However, ISO is not referenced here. Throughout the policy there is a clear focus on customer needs, continual improvement as well as involvement and commitment. Lastly, the policy provides an outline of the QMS review and is too is broad. The policy stresses that the institution's top management as well as academic board are responsible for implementing the requirements of the policies and procedures. The internal QMS review programme includes (1) Quarterly academic reviews, (2) Scheduled internal QMS audits, and the recently added (3) Annual Management Reviews.

6.3.1.3. Management Review Policy

This policy is two pages in length. The policy provides an *Introduction* that states the purpose of the policy, which establishes a system and assigns responsibilities; it describes the background, the approach as well as the control and maintenance mechanisms, which state that the QA Representative is responsible for content and maintenance. Secondly, the policy outlines the exact procedure of how the quality system is reviewed.

This document outlines the management review procedure, which includes subsections such as attendance, the scheduling that takes place at least once a year, and the agenda along with the policies and topics on the agenda. However, if an unscheduled management review takes place, it is to deal with emerging issues which have been determined by the QA representative or top management. Once management's review has been completed, a review output takes place. This procedure requires an action for the improvement of the QMS, which pertains to student and/or customer needs as well as provision of resources. The minutes of meetings are also distributed to attendees as well as those who were absent. Lastly, the records of the formal management review are documented and stored in an electronic file that is available to the QA Representative. The records of management reviews are maintained for a minimum of three years.

6.3.1.4. Corrective & Preventative Action

The aim of this policy is to systematically document a procedure for anticipating, solving, implementing and following up on corrective as well as preventative actions. The institution uses numerous tools to promote continuous improvement, including brainstorming, flowcharting as well as team problem solving to name a few. Notably, however, any individual within the institution is able to suggest improvements to the QA Representative. This policy also encourages employees to submit ideas on improvements. Not only are employees able to provide ideas for improvement, but any employee in the institution may submit a Non-Conformance Report Form. A number of sources are used to initiate corrective action, namely customer complaints, internal and external audits, and management review meetings. In the instance of preventative action being required, it is regarded as a response to opportunities for improvement, which has emanated from the results of management review meetings, internal audits, customer feedback as well as self- or external assessment.

The way in which non-conformance is identified and reported was an interesting finding. Any employee who identifies non-conformance has the responsibility to take the appropriate action and report non-conformance by completing a non-conformance form and submitting it to the non-conformance coordinator. This means that corrective action is not limited to a specific

department i.e. QA Department. Additionally, this report is applicable for any non-conformance that has been identified within the institution.

The policy also stipulates that tracking of the report has to take place. The investigator of the report assigns a number as well as a reply due date. The reports are categorised according to their nature and urgency, e.g. risk. Notably, this policy encourages the investigator to determine the root cause of the non-conformance so that the non-conformance issue is avoided in the future. As noted in the participatory observation, before the non-conformance form can be closed, the investigator has to follow up and verify whether corrective action has taken place. This is also noted in the policy. What's more, the policy provides opportunities to prevent non-conformance through training, if it is required or recommended by the investigator. Finally, trending analysis of non-conformance takes place. Every month the non-conformance reports are reviewed in order to identify whether the same errors are being made.

Table 6.4. provides a short summary of the document analysis findings. This has been compiled so that the qualitative data within the study are more accessible to the reader.

Following the document analysis, the participatory observation is discussed below.

The table below provides a short summary of key findings within this section:

Table 6.4. Summary of the document analysis findings.

Documents Reviewed:	**Findings**
ISO 9001:2015	• This document was limited on the public domain. • Only certain pages were provided, and the table of contents was reviewed. • The Quality Manual is divided into 10 sections and these sections within the document are not referred to as 'policies.' • This document allows institutions to populate their institutional information into the document template, similar to the *ETDP SETA's Generic QMS Template*. • The purpose statement of the Manual has been omitted. • This document can be divided into the same requirements as the *Generic QMS* i.e. the business system and the training system. • SWOT and PESTLE analysis are encouraged so that the institutional strategy is aligned to these analytical methods. • KPIs are used in order to link the objectives for controlling and monitoring institutional processes. • A great emphasis is placed on risk and is implemented` in the four available sections of the document. • The document does not address a culture of quality. • A greater focus is placed on risk and corrective action as well as improvement.
Quality Assurance Policy (***Institution 2***)	• The structure and layout of this policy differ greatly from that of **Institution 1.** • A key difference is allocation of responsibility. The CEO is the primary person responsible for the QMS, followed by the QA Manager.

	• The institution's QMS model is based on UMALUSI, Western Cape Education Department; DHET and aligned to all the ETQAs. Yet, the policy does not refer to ISO. • A table is provided which indicates the policies, procedures, guidelines and forms which emanate from the QMS. • The description of the policy revision is absent. • The objectives of the policy are provided; these objectives are promoted and underpinned by SAQA. • The QA manager is responsible for conducting all quality processes including academic and non-academic. Thus, the practice of QA is not restricted to a specific area, i.e. academic audits. • The document provides a legislative context which refers to all the relevant legislation which is applicable to the policy as well as institution. • This policy provides definitions of QMS, QA, quality audit and quality control and are derived from SAQA's QMS for Training providers. • A strong focus is placed on customer needs, continual improvement as well as involvement and commitment. • The final section of the policy provides a broad outline of the QMS review process. • Top management and the academic board are responsible for implementing the requirements of policies and procedures.
Management Review Policy (***Institution 2)***	• This policy consists of two pages. • Notably, the document refers to a "QA Representative" instead of QA Manager. • The QA representative is responsible for the maintenance of the policy's content. • The policy review procedure is outlined and provides a detailed description of the process as well as components which form part of the review process. • Review meetings are held annually. • If unscheduled meetings are held, they are to deal with unforeseen changes within the institution, e.g. risk. • A review output takes place and requires an action of improvement for the QMS which relates to customer needs together with the provision of resources.

	• The records of the management review meeting are documented and stored electronically and are maintained for a minimum of 3 years.
Corrective & Preventative Action (***Institution 2***)	• The policy's aim is to systematically document a procedure for anticipating, solving, implementing and following up on corrective as well as preventative actions. • Brainstorming, flowcharting as well as team problem solving are used as tools to promote continuous improvement. • Any individual within the institution is able to contribute suggestions for continuous improvement. • A key finding was that any employee in the institution can issue a non-conformance report (NCR). • Any employee who identifies non-conformance has the responsibility to take the appropriate action and report non-conformance by completing a non-conformance form and submitting it to the non-conformance coordinator. • NCRs are a mechanism to promote a quality culture and it shows that corrective action measures are not limited to a specific department, i.e. QA department. • Corrective action is initiated through customer complaints, internal and external audits together with management reviews. • The policy stipulates that tracking of these reports has to take place. • Reports are categorised according to their nature and urgency, i.e. risk. • The root cause of the non-conformance has to be determined, so that the non-conformance issue is avoided in the future. • The policy stipulates that the investigator has to follow up and verify whether the corrective action measure has taken place. • The prevention of non-conformance is promoted through training initiatives. • On a monthly basis NCRs are reviewed in order to identify whether the same errors have occurred.

6.3.2 Participatory Observation

It is important to note that the participatory observation did not take place. This is because an external moderation was conducted prior to the research taking place. Given this, the researcher noted this challenge as a limitation to the study. Regardless, the participant showed and explained the audit process as well as the compliance documents involved in the process to the researcher.

The audit process that was explained applies to NATED as well as NC(V) qualifications. Firstly, the participant explained the structure of the qualifications. With regards to NATED programmes, the duration of the course is dependent on the type of course the student chooses to study. Therefore, if the student registers for Engineering N1 – N6 the course duration is 1 year; of which 6 months is theoretical and 6 months is Work Integrated Learning (WIL). Once completed, the student will obtain an N6 Diploma. On the hand, if the student registers for Business and Utility studies, the duration of the course is 3 years, of which 18 months are theoretical and 18 months are WIL. In contrast, the NC(V) is equivalent to a National Senior Certificate and constitutes 3 NQF levels. The duration of this programme is 3 years and for each year an NQF level is completed. Unlike occupational qualifications that have 3 remedial opportunities, NATED and NC(V) programmes have pass or fail, whereby 40% is the minimum pass rate and NC(V) has normal school pass rate requirements.

Following this, the participant explained the processes as well as procedures that take place before moderation is conducted. A pre-moderation checklist must be completed by the examiner. This checklist is a requirement from DHET. The checklist has 8 criteria which cover the analysis of task; technical criteria; content coverage; cognitive skills types of questions/tasks; language and bias; overall impression; and assessment tools. Further, the checklist provides recommendations and indicates whether the task along with the assessment tool has been approved, conditionally approved or rejected.

The next process involves the post-moderation checklist. This quality mechanism is conducted by the moderator. The moderator chooses 10% of written assessments, i.e. tests or tasks. The moderation sample needs to represent best, medium as well as poor performance. If the moderator identifies that the variance between the lecturer's and moderator's marks is greater than 5% for majority of the sample, the lecturer is advised to re-mark the scripts. Once this process has been completed, the lecturer has to submit the sample back to the moderator. If all is in order, the lecturer hands the assessment back to the student and the student's marks are captured onto the IT System (ITS). This entire process is outlined on the checklist. The final process requires the moderator to complete a criteria checklist and recommendations for

improvement are provided to the lecturer. The participant explained that the recommendations for improvement are to assist the lecturer developmentally. The participant explained that DH*ET al*so conducts audits. As such, DHET sends out a list and requests a percentage of files to moderate.

Following this, the QA Department's internal audit is conducted. These audits are conducted at the various campuses where student files are kept. The Portfolio of Assessments (PoA) as well as subject files are audited. The Institution has recently been certified with ISO 9001:2015, which is a regulatory requirement of DHET. The internal auditor checks the files according to ISO 9001:2015 guidelines which is conducted by South African Bureau of Standards (SABS). But accessing this checklist was later prohibited. However, the researcher was able to view the audit plan.

The participant emphasized that for each subject there must be a PoA as well as a subject file. Once a task or a test is completed, the student hands it over to the lecturer. The lecturer completes the necessary administrative documents and once all the documentation is completed, the lecturer has to review the PoA and subject file and ensure it is correct. The lecturer may call on the assistance of the student administrator. This process has to take place for all the subjects and each class has approximately 35 students with a total number of students amounting to almost 10 000.

Taking this background into account, the auditor explained the quality assurance process for NC(V) qualifications whereby PoAs and subject files are audited. The findings of the audit are documented on an Excel spreadsheet. Firstly, the names of each learner are captured. This is then followed by the programme and in this instance, it was Office Data Programme. The auditor explained that where "*In order"* is noted it means the specific requirements have been met. One example of the requirements is "*Assessment and Subject Guidelines."* This is a policy which provides the student with information about the programme. Therefore, if findings e.g. discrepancies, are found, the auditor notes the finding on the spreadsheet and tries to assist the lecturer. The auditor does not overwhelm the lecturer with endless reports; instead the auditor assists in correcting the error by going to the DHET website and downloads the correct subject guideline. The auditor will then email the lecturer the correct guideline and ask him/her to remove the old version and insert the new version into the file. The auditor continued by mentioning the other documents that are checked, which included an analysis grid which the lecturers have to draw up themselves. Often the grids are not printed and placed into the file and the auditor cannot assist in this regard. Furthermore, the pre- and post- assessment checklists are also audited. The auditor has to ensure that these checklists are inserted in the

PoA and it also need to be completed correctly. What's more, the auditor needs to check whether the checklists are the new version, as version control is a requirement of ISO.

Once all the PoAs and subject files have been audited, the auditor chooses 70 PoAs to audit. It was stated that only small discrepancies are found. This is because most of the "major" findings have already been audited and corrected. Yet the Institution's aim is to have no mistakes. Once the audit spreadsheet has been completed, a summary report is drawn up for the specific campus. This report provides an analysis of what was audited (the percentage of files) as well as the percentage of the findings that were noted. However, the audit process does not end with a summary report. The auditor will refer back to the files with errors and verify whether the corrections have been made. If the errors have not been corrected, the lecturer or person responsible is issued with a Non-Conformance Report (NCR). This report is used as a quality management tool. However, individuals in the institution view this document as a disciplinary mechanism. Yet the auditor stressed this is not the case. The NCR is purely developmental. As such, the structure of the report was explained. The recipient is issued with a new NCR number along with the date, the recipient's name, who the initiator of the report is, the type of error, the risk identified (this is because ISO is focused on risks), and an acknowledgement section is provided for the recipient.

Lastly, the participant emphasised that although ISO is the institution's primary statutory body, in terms of the occupational programmes, the institution's QMS still meets the 6 procedures or criteria of SETA. Not only are there academic audits, but the QA department also audits all the processes within the Institution. The auditor also conducts Occupational Health and Safety Audits.

Table 6.6. provides a short summary of the participatory observation's findings. This has been compiled so that the qualitative data within the study are more accessible to the reader.

Considering the document analysis, the participatory observation and the interview provides an understanding of the QMS from the participant's perspective along with their knowledge of the QMS, quality and a quality culture.

The table below provides a short summary of key findings within this section:

Table 6.5. Summary of the participatory observation's findings

	Findings
Observation	• The participatory observation did not take place. As an external moderation was conducted prior to the research taking place. • The audit process was verbally explained to the researcher. • This quality audit process is applicable to NATED and NC(V) qualifications. • The duration of NATED programmes is dependent on the learner's course and NC(V) programmes have a 3-year duration. • These programmes are categorised by pass or fail, whereas occupational qualifications have 3 remedial opportunities. • The quality audit consists of 2 processes: (1) pre-moderation checklist must be completed by the examiner and (2) post-moderation checklist is completed by the moderator. • The pre-moderation checklist ensures that the assessment meets the 8 criteria, whereas the post-moderation audits tasks and tests of learners. • If the moderator identifies that the variance between the lecturer's and moderator's marks is greater than 5% for majority of the sample, the lecturer is advised to re-mark the scripts. • If all is in order, the student's marks are captured onto the IT System (ITS). • The moderator and examiner can provide recommendations, which are developed to assist the lecturer developmentally. • Both processes are clearly outlined on the checklists. • DH*ET al*so conducts audits and sends out a list and requests a percentage of files to moderate. • Once this process has been conducted, the institution conducts its internal QA audit. • The audits are conducted on-site at each of the institution's campuses. • The Portfolio of Assessments (PoA) as well as subject files are audited. • All the files are audited according to ISO 9001:2015 audit checklist – accessing the checklist was prohibited. • The auditor checks all the subject files and only selects a certain percentage of POA files. • The findings of the audit are documented on an Excel spreadsheet.

	• On the audit sheet "*in order"* means that the audit requirements are met. • If discrepancies are found, the auditor notes the finding on the spreadsheet and tries to assist the lecturer. • The auditor will the email the lecturer the correct guideline and ask him/her to remove the old version and insert the new version into the file. • The pre- and post-moderation checklists are audited as well, and these documents have to be in the PoAs. • Updated versions of policies are also checked. • When PoA's are audited only small discrepancies are found. This is because most of the "major" findings have already been audited and corrected. • The institution's aim is to have no mistakes. • A summary report is drawn up for the specific campus. • This report provides an analysis of what was audited (the percentage of files) as well as the percentage of the findings that were noted. • The auditor will refer back to the files with errors and verify whether the corrections have been made. • If the errors have not been corrected, the lecturer or person responsible is issued with a Non-Conformance Report (NCR). • The NCR is a quality management tool. However, individuals in the institution view this document as a disciplinary mechanism. • The auditor stressed that the NCR is purely developmental. • Although ISO is the institution's primary statutory body, in terms of the occupational programmes, the institution's QMS is still in line with the 6 procedures or criteria of SETA. • The QA department also audited all the processes within the Institution, whether it is academic or non-academic.

6.3.3. Interview

The study included an interview schedule for participants to answer. If elaboration of a question was needed, the researcher explained the question to the participant. If the participant required further elaboration, the researcher would ask the question in a different way.

6.3.3.1. Profile of Participants

As mentioned in Case Study 1, the individuals who took part in the study were asked to complete an interview schedule. Because the study is anonymous, the participants were asked to omit the first three questions of the interview schedule, as these questions would make the participants identifiable. The research sample included individuals from ***Institution 2***'s Quality Assurance Department. The average experience within this department is 5 years. The number of years work signifies the participants understanding and knowledge of the components of QA.

6.3.3.2. Theme: Quality Awareness of the Institution's Employees

The sample was asked a series of questions in terms of quality awareness within the institution. These questions provide the researcher with information on how the individuals within the institution perceive quality along with its quality culture. With regards to the question of whether the department requires more people to assist in its day-to-day activities. The participant answered *yes* and elaborated by saying:

> *"... because the quality assurance department does not only focus on quality functions."*

The researcher followed up this question by asking what else the QA department does, besides implementing quality functions. The participant explained that non-academic audits are also conducted. This question was presented in order to determine whether the QA department has the resource capacity to conduct quality audits as well as meet the quality needs of the institution. The question was also posed to determine whether the institution has a skills gap within its QA department.

The next question on how many colleagues at the institution's other sites are linked to or are involved in the QA process. The purpose of this question was to identify the QA department's knowledge of how many stakeholders assisted in the QA practice. Interestingly, the participant answered the question in terms of how the QMS is updated and who as involved in this process.

> *"Top management assist[s] with continuous improvement of policies, procedures, processes and documentation."*

The participant did not mention that the student administrator at each learning site does assist in the QA practice. The total number of individuals was not indicated.

The following question presented to the participant asked how the organisation's overall awareness of risk would be rated, if the quality standard was not met. The participant indicated that if a risk ought to occur, the rating would be a 5 with a description of *critical*. The participant explained that "*When the institution is issued with a non-conformance by the external auditor, the institution will always ensure to correct the finding within the timeframe provided."*

The final question within this theme pertained to whether more individuals in the institution should be more aware if the importance of QA. The participant said *yes* and explained that

> *"If staff* [were] *more aware of the impacts* [when] *they don't comply with the various requirements. It will assist the QA department to focus more on areas where the improvement*[s] *are needed."*

This question was asked in order to determine and identify how the QA department perceives the importance of QA by individuals in the institution. It also provides a general idea of how seriously the notion of quality is implemented in practice.

6.3.3.3. Theme: Institutional Quality Assurance

The series of questions in this theme were presented in order to determine the participant's own knowledge and understanding of QA. To determine this, the researcher asked questions which pertained to the basics of quality and its components which relate to quality assurance and the QMS.

With regards to the question of whether the participants were aware of the existence of the institution's QMS, the participant in the sample answered *Yes*. A sub-question was then asked. The participant was asked whether they had received orientation on this policy during their time at the institution. The participant verbally explained that orientation occurs (for all individuals) at induction into the institution and stated in the interview schedule *"Yes, when I was inducted."*

Following this, the participant was asked to explain their understanding of what a QMS is. The participant's response *was "The QMS is a system that* [is] *available electronically to all staff. The system include*[s] *all policies, procedures, processes and templates used within the institution. The system make*[s] *it easier for new staff members to do their work, for example for each department there are separate processes and it outline*[s] *all the steps that must be followed."*

The participant was asked whether the institution has a hard copy or a soft copy of the QMS. The question was asked in order to determine how well the participants knew where the QMS is located. The participant was also asked to provide the exact location of where the QMS is stored, for the hard copy as well as soft copy. These questions were posed in order to determine whether the QMS is accessible to all staff and to identify whether a culture of quality is

implemented through its accessibility. The participant indicated that the institution has a hard copy as well as a soft copy. The hard copy is locked in the cupboard and the soft copy is on the institution's server.

The final question in this theme pertains to the responsibility of the QMS. The participant was asked whether he/she knew who is responsible for amending and implementing any changes to the QMS. The participant answered *"Yes, the QA Officer."* The participant was asked whether individuals in the institution are made aware of any changes to the QMS. The participant said *"E-flashes are sent out to inform staff of changes made or how new documents are upload."*

6.3.3.4. Theme: QA Systems and Processes

The series of questions in this theme was asked in order to establish the processes which the institution uses when conducting a quality audit. This theme investigates whether the quality audit is standardised throughout the institution.

The participant was asked whether there are standard operating procedures/processes which are followed when conducting a quality audit. The participant in the sample agreed that a standard operating procedure/process is followed. The participant explained that:

> *"Yes, on the QMS each department* [has] *their various processes that must be followed."*

This was followed by a sub-question, namely whether the procedures/processes mentioned in the previous question are official institutional procedures/processes. The participant answered *yes* and provided the name of the instructional guide "*Internal Audit process: QA/IA version 001."*

The next question asked the participant whether a checklist is followed in order to ensure that all the documents are in place. The participant in the sample answered *yes*. The participant was asked whether this checklist assists in making sure that the quality meets the required standards and whether it assists in making the process easier. The participant answered *yes* and verbally stated that when internal audits of assessments are conducted, the participant uses the audit checklist of ISO in order to ensure the criteria are met when an external audit takes place.

The next question asked the participant for his/her opinion. The question asked whether the quality process is standardised throughout the organisation. The participant said "*Yes, all the campuses are following the same processes."*

Once again, the final question asked the participant for his/her opinion. The question posed to the participant was what can be done to improve the organisation's quality assurance process. The participant stated that "[We need *Quality Assurance* training on] *ISO 9001:2015."*

Table 6.7. provides a short summary of the interview's findings. This has been compiled so that the qualitative data within the study are more accessible to the reader.

The table below provides a short summary of key findings within this section:

Table 6.6. A summary of the interview findings.

Theme	Questions:	Findings
Participant Profile	1. How long have you worked in the QA department?	• Given that the study was anonymous, the participant was asked not to fill in their gender, age and designation. • The participant has five years of experience in the quality assurance department.

Quality Awareness of the Institution's Employees	1. Does the department require more people to assist in its day-to-day activities?	• The Participant said *yes*.
		  • *"… because the quality assurance department does not only focus on quality functions."*
		• The researcher asked what else does the QA department audit?
		  • *"Non-academic audits are also conducted´*

	2. How many colleagues, at the institution's other sites, are linked to or are involved in the QA process	• The question was answered in terms of how the QMS is updated and who as involved in this process. • *"Top management assist*[s] *with continuous improvement of policies, procedures, processes and documentation."* • The participant did mention that the student administrator at each learning site does assist in the QA practice. The total number of individuals was not indicated.
	3. How would the organisation's overall awareness of risk be rated, if the quality standard was not met?	• The participant indicated that if a risk were to occur, the rating would be a 5 with a description of *critical.* • "*When the institution is issued with a non-conformance by the external auditor, the institution will always ensure to correct the finding within the timeframe provided."*
	4. Should more people in the organisation be aware of the importance of QA	• The participant said *yes* and explained that: ○ *"If staff* [were] *more aware of the impacts* [when] *they don't comply with the various requirements. It will assist the QA department to focus more on areas where the improvement*[s] *are needed."*

Institutional Quality Assurance	1. Are you aware of the existence of the institution's QMS?	• The participant in the sample answered *Yes*.
	2. Did you receive orientation of this policy, whether it was since or during their time at the institution.	• The participant verbally explained that orientation occurs (for all individuals) at induction into the institution and stated in the interview schedule: "*Yes, when I was inducted."*
	3. What is your understanding of a QMS?	• The participant was able to provide a practical understanding of a QMS: ○ *"The QMS is a system that* [is] *available electronically to all staff. The system includes all policies, procedures, processes and templates used within the institution. The system make*[s] *it easier for new staff members to do their work, for example for each department there are separate processes and it outline*[s] *all the steps that must be followed."*
	4. Does your institution have a hard copy or a soft copy of the QMS?	• The participant indicated that the institution has a hard copy as well as a soft copy.
	5. Please provide the exact location of the QMS, for both the hard and soft copy.	• The hard copy is locked in the cupboard and the soft copy is on the institution's server.

	6. Do you know who is responsible for amending and implementing any changes to the QMS?	• *"Yes, the QA Officer."*
	7. Are employees notified of these changes?	• The participant said *"E-flashes are sent out to inform staff of changes made or how new documents are upload."* • The E-Flashes notifies all employees of the changes.

QA Systems and Processes	1. Are there standard operating procedures or processes which are followed when conducting a quality audit?	• The participant in the sample agreed that a standard operating procedure/process is followed. The participant explained that: ○ "*Yes, on the QMS each department [has] their various processes that must be followed.*"
	2. Are the procedures or processes official institutional procedures/processes?	• The participant answered *yes* and provided the name of the instructional guide "*Internal Audit process: QA/IA version 001.*"
	3. Do you follow a checklist to ensure that all the documents are in place?	• The participant answered *yes* and verbally stated that when internal audits of assessments are conducted, the participant uses the audit checklist of ISO in order to ensure the criteria are met when an external audit takes place.
	4. Does the checklist assist in making sure that the quality meets the required standards and whether it assists in making the process easier?	• The participant said *yes*.

	5. In your opinion, is the quality process standardised throughout the organisation?	• "*Yes, all the campuses are following the same processes.*"
	6. In your opinion, what can be done to improve the organisation's quality assurance process	• The participant stated that "[We need] *Quality Assurance* [training on] *ISO 9001:2015.*"

6.4. SUMMARY

The analysis of **Institution 1's** and **Institution 2's** QMS was conducted through the document analysis, participatory observation (in the case of ***Institution 1***) and the four main themes in the interview. If one compares the findings in the document analysis, it is evident that **Institution 1's** QMS is aligned to ETDP SETA's guidelines. As a result, the vagueness within the guideline as well as template are also evident in the institution's QMS. Given the findings, **Institution 1's** QMS lacks procedural implementation strategies and more attention needs to be placed on the *Management Review Policy* together with implementing effective non-conformance and corrective action mechanisms. In terms of the participatory observation, the institution lacks a coherent filing system as well as institutional checklists and internal staff capacity. However, the researcher does acknowledge that certain aspects within the preparation of an external moderation are out of the institution's control. Lastly the themes in the interview provides insight into the employees understanding and knowledge of QA together with the QMS. The findings reveal a trend whereby one or more participants are unaware of certain QA or QMS procedures. This is concerning, as each individual ought to know the components which form part of their department.

Institution 2's findings indicated a QMS that was well documented and outlined in terms of procedural processes. The way in which these processes are implemented were limited as the participatory observation of the institution's QA practice was not observed. Furthermore, ISO's Quality Manual did not promote a culture of quality in the way that ETDP SETA's guides did. However, risk and the conformance of risk were at the heart of this guideline. In terms of the participatory observation, the research could not deduce whether the processes explained was actually practiced and implemented, which is thus a limitation of the study. However, quality tools such as NCRs are encouraged and are seen as a mechanism that assists in monitoring common non-conformance trends and the developmental strategies that should be implemented to prevent these trends from occurring. Once again, the themes in the interview provides insight into the employees understanding and knowledge of QA together with the QMS. Due to the sample size being so small in this case study, it was difficult to deduce employee knowledge and understanding of QA practices and the QMS.

These two institutions present different trends in terms of their policies, the practice of QA and employee understanding. However, if these institutions implement each other's practices – for instance **Institution 1** implementing NCRs or providing orientation on the QMS and QA practices – this would mitigate challenges within the institution. As a result, the research is unable to identify which institution, i.e. public or private, has the best QA practices and QMS.

CHAPTER 7

CONCLUSION AND RECOMMENDATIONS

7.1. INTRODUCTION

The last chapter of this study includes a summary of recommendations and draws some conclusions, which are principally based on the study's objectives and research questions. This chapter will gauge to what extent the objectives of the study have been achieved. The purpose of the comparative international experiences was established as a benchmark with which to compare South Africa's occupational learning practice. The policies along with the legislative underpinnings of occupational learning and QA in South Africa presented a timeline of skills development policies and legislation which influences the OLS along with the statutory bodies which impact on the system. Accordingly, the objective of both case studies was to analyse and describe the QA processes of ***Institution 1*** and ***Institution 2,*** so that the differences and similarities could be determined, i.e. the trends, between a private vocational institution and a public vocational institution. With that being said, this Chapter addresses the final objectives which provides recommendations for **both** institutions. The conclusions and recommendations are formulated with reference to each chapter's objective along with the data presented in these chapters. The recommendations are provided as a contribution towards strengthening the practice of QA along with the QMS. This chapter also discusses the limitations of the study, before the recommendations and conclusions are presented.

7.2. CONCLUSIONS AND RECOMMENDATIONS

The conclusions will refer back to each objective in the five chapters; for each case study, specific trends will be noted as they pertain to the relevant conclusion and this will be followed by recommendations. In Chapter 2 the study reviewed the literature pertaining to the country's skills development shortage together with a consideration of the different concepts of quality. The literature stressed that M&E tools needs to be aligned with QA and vice versa, because of their similar aims and functions. Chapter 3 demonstrated that the OLS has similar components within its system to those of the three vocational systems it was compared to. Chapter 4 examined the legislative and policy requirements which influence skills development as well as QA, and gives an indication of the complexities within these requirements. Chapter 5 outlined the design of the empirical study. Lastly, Chapter 6 produced the raw findings of the study which were obtained through the document analysis, participatory observation (of ***Institution 1*** in particular) and semi-structured interview in both institutions. The recommendations have been drawn from the findings indicated in these chapters. These findings are used as an index to design strategies that will assist both institutions with improving their QMS, QA practices and quality-oriented culture. The recommendations are addressed not

only to the vocational institutions but also to the statutory bodies. Specific strategies are suggested, which the researcher outlines below.

7.2.1. Examining the Importance of QA and its Relationship to M&E

In addressing the objective of examining the importance of QA and its relationship to M&E, the following trends were identified; this is followed by the relevant recommendations.

7.2.1.1. Adherence to good standards of practice, accreditation criteria and internal capacity

The literature review presented in Chapter 2 indicates that quality assurance systems are essential in order to ensure effective, operational and sustainable standards for vocational education and training; this means that the recognition of learning outcomes together with the transparency of qualifications is necessary for the mobility of learners, trainers and workers (Irimiea & Serban, 2015:171). Providers are required to follow good standards of practice and adhere to suitable accreditation criteria (DHET, 2013:52). le Grange (2014:23), asserts that a quality-orientation and the maintenance of quality need continuous work and structured processes. For quality education to be delivered, institutions must strengthen their internal capacity (DHET, 2013:52). In both case studies it was evident that the institutions are required to follow guidelines as well as templates that aid Quality Assurance managers with meeting the correct quality standards for the QMS, as required by the statutory body, specifically the 8 QMS criteria. Yet in terms of the QMS, ***Institution 1*** makes use of the ETDP SETA's Generic QMS. Although the template does not explain its purpose, it provides a layout as well as a format for providers whereby they can adapt the information to meet their institutional needs. Furthermore, this template is used as a control mechanism in order to ensure consistency amongst training providers. Ultimately, the external moderation process becomes easy to quality assure. However, the output of QA practice is often out of the institution's control, as errors or limitations occur as a result of technical hitches on the SERVICES SETA's Learner Management Information System, which was observed whilst conducting the participatory observation at ***Institution 1.***

Institution 2 is required to meet the accreditation criteria of ISO. However, the QMS is still aligned to DHET, the relevant SETAs as well as UMALUSI. Similar to the ETDP SETA's Generic QMS, ISO's QMS is also a template which can be adapted according to the needs of the institution. Although these templates are designed to aid training providers on how to develop and draw up a QMS, they also allow for "fly-by night" training institutions to be established more easily. Unlike ETDP SETA's QMS template, ISO does not have separate "policy" documents. Instead, each "policy" is referred to as a "section" in the QMS. The template is vague in terms of how processes and procedures are to be implemented. This results

in a policy implementation problem throughout the QMS. Both institutions reflect a critical vacancy in their organogram: ***Institutions 1*** and ***2*** require a Risk and Compliance Officer. In addition, ***Institution 2*** requires a QA manager.

I. *RECOMMENDATIONS*

- Based on this conclusion, it is recommended that ETDP SETA updates its QMS template according to the criteria which it requires training providers to adhere to.
- It is also suggested that the ETDP SETA updates it QMS template at least every second year, in the same way it requires training providers to update their QMS annually. This will prevent the QMS template from becoming dormant and out-dated.
- ISO should consider dividing the QMS into stand-alone policies.
- To prevent the establishment of "fly-by night" institutions, ETDP SETA should limit the access to its QMS template, either by removing the template from the public domain or by providing the template to training providers who are registered with ETDP SETA, or by limiting access to the policy by establishing a monetary value to the QMS (i.e. by making people pay to use it), similar to the way in which ISO restricts access to its Quality Manual and other quality-related documents on the public domain.
- It is recommended that SETAs improve their learner management systems in order to accommodate the high numbers of occupational qualifications which go through the system.
- In order to avoid vagueness and promote policy implementation, it is recommended that these templates should rather be redesigned as a guide whereby the institution provides detailed SOP processes.
- Both institutions should prioritise the recruitment of a Risk and Compliance Officer. The vacancy should be advertised on all career portals. It is recommended that ***Institution 2*** should consider employing the current QA Officer as the institution's QA Manager, as all the current QA officers meet the job requirements and have experience in the institution's QA department.

7.2.1.2. Quality as Perfection

According to Sallis (2002:13), quality is not an end in itself, but rather it is a means of determining whether the end product has met the specific standards. This definition of quality is firstly concerned with measuring up, and secondly with ensuring that conformity is a predetermined standard. Furthermore, this concept of quality is concerned with accountability as well as auditing, as they promote and ensure consistency together with conformity. However, accountability is aligned to the type of quality approach which the institution implements at a given time. This approaches stresses consistency within external monitoring of competence

together with service standards, whereby the focus is placed on the flawless and accessible administrative support systems within institutions. Yet Doherty (2012:81) argues that too often the adherence to standards and the insistence on compliance result in a loss of autonomy and creates a barrier for innovation as well as progression.

The notion of "zero-defects" within the educational context is unrealistic. If QA discrepancies are not made by the institution or overlooked by the external moderator, the question remains how will institutions learn from these mistakes and how will they apply preventative measures along with continuous improvement mechanisms to ensure QA errors do not occur? This does not imply that institutions should make mistakes purposefully, but if a QA discrepancy occurs the correct developmental measures ought to be implemented. Although mistakes are development opportunities, one does not want to encourage them. However, this notion enables opportunities for "fixing" of compliance documentation within the institution. While conducting the participatory observation for both case studies, it was noted that institutions are given a remedial opportunity if the external moderation standards have not been met. In this instance, the outputs are the compliance documentation which should meet the specifications of the audit guidelines. ***Institution 1*** promotes quality as perfection in its QMS. This is either referred to as the "Degree of Excellence" or "zero-defects." These concepts have been promoted by the ETDP SETA's Generic QMS, whereas ***Institution 2*** promotes quality as conformance.

In the Quality Policy of ***Institution 1,*** "quality objectives" are referred to throughout the document. However, there are no stated quality objectives, whereas ***Institution 2***'s Quality Assurance Policy only refers to the objectives of SAQA. Both institutions refer to the Quality Assurance Policy as the "Quality Plan." However, the research found that this document is more of a reference policy, as it provides a number of definitions, indicates how the policy is applied in the institution, and lists a number of values. For quality to be "perfect", the quality control as well as quality assurance process has to be conducted in an orderly manner. The researcher observed that when ***Institution 1***'s internal quality audit was being conducted, compliance documentation was filed in a disorderly way and there was no consistency with regards to the filing process. This ultimately prevents the "degree of excellence" being achieved and increases the chances for defects to occur.

II. RECOMMENDATIONS

- Given that the notion of "zero-defects" is promoted in ***Institution 1,*** it should be stressed that training institutions are provided with remedial opportunities by the external moderator and they should thus be open to these developmental opportunities.
- It is suggested that "fixing" compliance documentation should be avoided. ***Institution 1*** should consider control mechanisms such as implementing non-conformance

reporting system as well non-conformance software, which will assist in tracking the corrective action together with determining non-conformance trends.

- It is recommended that both institutions provide *their own* quality objectives for the QMS and not apply those of SAQA, ETDP SETA, QCTO or ISO. Clear objectives within the specific QMS will provide the institution's staff with a precisely defined understanding of what the QMS aims to accomplish. Ultimately, this would promote a "culture of quality" as all institutional staff will know the quality objectives as well as what standards need to be met within the institution. These objectives would then result in the QMS becoming a "quality plan."
- ***Institution 1*** is encouraged to document and officially implement the quality control process in terms of how each SETA requests the compliance documents. This would promote consistency throughout the institution and it will also serve as a guide for individuals who are involved in the quality control and assurance practice. Furthermore, the institution is urged to file each project's programme chronologically with all its compliance documents in the same divider. For instance, the registers for the programme, learner feedback forms, facilitators reports, assessor reports and moderator reports should be in one divider in chronological order. The institution should consider scanning these documents onto a network driver as a back-up and security mechanism.

7.2.1.3. Consistency, Accountability and Innovation

It is important to backtrack to the concept of quality, which has been divided into five interrelated categories. Sallis (2002:1) notes that conceptualising quality in the field of education is difficult. Similarly, Luckett (2006:14) defines quality as a concept that is elusive, subjective and value-laden; it can be related in everyday usage to what is good, excellent and even worthwhile. However, one individual's idea of quality may conflict with someone else's idea (Sallis, 2002:1). If quality is viewed as perfection, then quality pertains to the idea of "zero defects", whereby the outputs must meet the precise specifications of the desired product.

The research process leads to a finding that, for consistency to be maintained, standard operating procedures (SOPs) needs to be followed accordingly. The interview and the participatory observation which were conducted with participants from ***Institution 1*** provided evidence that the internal quality audit procedures and processes were consistent in practice. However, in the institution's QMS the quality processes were merely mentioned in vague terms. Thus, the quality audit practice is not aligned with the QMS. Furthermore, the research process led to a finding that there were no documented standard operating procedural guidelines or checklists for staff members to follow. This observation was supported by the interview, as participants were asked how they were taught to conduct the internal quality audit. Each

participant was taught through verbal communication whereby they made their own notes and would refer to these notes if need be.

Notably, however, the participants only follow a checklist which assists them in checking whether or not the compliance documents are in place. There is no checklist or guideline for the quality audit procedure in ***Institution 1***. In ***Institution 2*** QMS provides SOPs, guidelines as well as process flows on how to conduct an internal quality audit. However, the way in which these processes are applied in the institution was not observed. Therefore, it cannot be concluded that the institution implements these processes in practice according to the SOPs, guidelines and process flows, as noted in the section on the limitations of this study.

In both institutions the responsibility for maintaining quality is that of the QA manager, as noted in the QMS. However, this is not ideal as TQM stresses that all individuals within the institutions should be held responsible and accountable for quality. In today's digital age, technology has certainly come to the forefront especially in terms of information dissemination. However, because of the vast amount of administrative work which arises when a quality audit is conducted, there is no choice but to use the resources on hand.

One key finding was the way in which the QMS was shared in both institutions and who has access to the QMS. The research process led to a finding that ***Institution 1*** stores the QMS on a network drive, where it is filed in a folder and all employees have access to it. In the interviews participants of ***Institution 1*** were asked whether the institution has a hard copy of the QMS and where it was located. Two out of the four participants did not answer the question and one participant was not aware of the QMS existence. Only one participant could answer the question correctly and stated that it is stored in the QA Manager's cupboard in the office. Similarly, ***Institution 2*** stores the QMS on the institution's server, whereby each policy is categorised according to whether it is academic, non-academic, quality audits, management or internal processes. The hard copy of the QMS is also stored in the QA officer's cupboard and only the QA officer has access to it.

III. RECOMMENDATIONS

- In order to mitigate the discrepancy between the QMS and the quality audit practice, ***Institution 1*** should document its quality audit process in a systematic manner and develop quality control checklists that can be regarded as a reference source. Having a quality audit checklist or a guide will also hold employees accountable, as it is their responsibility to ensure that they refer to these QA mechanisms. In order to ensure responsibility, the quality audit checklist should have a tick box to ensure all the compliance documents are at hand, and whether or not the quality audit process has been followed and the employee has to sign and date the checklist. This will hold the

individual accountable if non-compliance occurs. This recommendation is made to ***Institution 2*** as well.

- Accessing the entire QMS is essential for all employees within the institution. ***Institution 1*** is urged to make the entire QMS available to its employees. This includes the business system as well as the training system, not just parts of them.
- It is recommended that ***Institution 1*** design a similar online system as ***Institution 2,*** which represents a visual representation of the QMS structure. the URL (address) provides access to the system and shows how the entire QMS is interlinked with the business and training system. Not only will this software provide access to QMS policies, but numerous processes and procedures along with guides and checklists are uploaded onto the system, which means that employees can download these policies, guides and checklists in PDF format. Although the researcher has recommended that the QMS be migrated from the network drive to a more interactive system, the researcher recognises that the institution is in the process of moving policies (the researcher is not sure whether it is the entire QMS) and uploading an e-learning platform for orientation purposes. The institution is also able to track and monitor which individuals access certain policies.
- It is recommended that both ***Institution 1*** and ***Institution 2*** be transparent as to where the hardcopy of the QMS is stored, how it can be located and who is responsible for updating and amending the QMS.

7.2.1.4. Developmental and Continuous Quality

Quality is also developmental (Mhlanga, 2013: 2013:25), as an approach to quality is viewed as fitness for purpose. This perception of quality is ascribed to any product that meets the standards for which it is set (Sallis, 2002:13). Furthermore, quality is recognised in this regard in relation to the ever-changing purposes which require constant re-evaluation of the appropriateness of standards (Green, 1994:15). This approach to quality is a procedural conception whereby extensive emphasis is placed on working to define systems as well as procedures.

As noted by Irimiea and Serban (2015:171), and earlier by Sallis (2002:14), quality is obtained by operationalising systems and produces and at the same time ensuring that the systems are operated efficiently and effectively. The final approach to quality is its transformative nature. Unlike the other approaches to quality where procedures and systematic processes are stressed, this approach is concerned with continuous improvement. One key purpose of quality assurance pertains to improvement. This purpose is less concerned with constraints and focuses more on encouraging adjustments as well as changes. The transformative approach rejects the relevance

of "product-centred approaches" such as fitness for purpose. This is because of problems that have arisen when product-based notions of quality have been translated into the service sector.

While conducting the document analysis, the research process led to a finding that within both institutions' quality is promoted as *continuous* improvement. Quality is viewed as continuous as a result of legislative changes, statutory body requirements and institutional needs together with learning how quality as perfection, fitness for purpose, conformance and advancing transformation needs to be applied. Although ***Institution 1*** mentions and refers to continuous improvement, there is no documented process on how continuous improvement is applied or practised in the institution. Yet it has been observed that continuous improvement is practised throughout the institution. But continuous improvement is not officially implemented.

The research process led to a finding that ***Institution 1*** does not have a policy which focuses only on corrective action. The processes for corrective action and non-conformity have been incorporated into the QMS Review Policy. Although this policy was recently developed, these processes are rather vague. However, the researcher was aware that non-conformance has only been practised to a minor extent. ***Institution 2*** continually uses corrective action measures to prevent and rectify non-conformance. Although, the practice of non-conformance was not observed, the document analysis provides a detailed process and procedure on how to apply corrective action if non-conformance is picked up. Non-conformity is implemented and actioned through a non-conformance report. The research process led to a finding that any employee in ***Institution 2*** can issue a non-conformance report. Identifying non-conformance is not limited to the Quality Assurance department.

IV. RECOMMENDATIONS

- ***Institution 1*** needs to systematically document the continuous improvement initiatives it practises with its employees.
- Although corrective action measures are fairly new in ***Institution 1,*** corrective action practices from other institutions such as ***Institution 2*** are recommended, as ***Institution 2***'s corrective action system is seen as a best practice model. Accordingly, ***Institution 1*** needs to consider appropriate and concise corrective action procedures and the institution is urged to design and implement non-conformance reports. As in ***Institution 2,*** any employee should have the liberty to issue non-conformance reports. Furthermore, in its "QMS Review" policy ***Institution 1*** should consider developing a corrective action policy and have two separate policies for review and corrective action. These corrective measures should be applicable to all departments.
- Practical and visual presentations should be demonstrated to all employees on how to identify and issue non-conformance reports within ***Institution 1.***

- The way in which non-conformity is managed has to be procedurally correct, highlighting the importance of a non-conformance policy. However, the institution has to be cautious, as non-conformance reporting should not be regarded as "disciplinary action." This corrective action mechanism is intended to be purely developmental.

7.2.1.5. Quality Assurance Monitoring and Evaluation Processes

Quality processes and procedures are conducted through quality control mechanisms (i.e. detection), quality assurance mechanisms (i.e. prevention) as well as total quality management (i.e. continuous improvement). Sallis (2002: 16), states that quality control is an after-event process. In other words, this process takes place retrospectively. Luckett (2006:14) views quality control from an M&E perspective and defines it as systematic and consistent evaluation to measure or check a product or service against pre-determined standards which result in summative judgements about the quality of the product or service. Doherty (2012:75) maintains that when quality improvement commences in an organisation, inspection has to occur first. As such, quality control is seen as a reactive approach which identifies non-compliance (Doherty, 2012:75). However, if quality improvement is seen only as reactive, it means that the institution would act in response to that specific issue instead of controlling it (i.e. prevention). Subsequently, quality assurance was – and to date still is – labelled "evaluation," which identifies bottlenecks and weak spots and seeks better solutions for these discrepancies (Vroeijenstijn, 1995: xiii). Hence, quality assurance is required and in vocational institutions QA becomes a necessity. Yet the outcome of educational products ought to be quality controlled and assured on a continuous basis. In essence, the quality process has to be monitored at the commencement of the project or programme, while the project or programme is taking place and after the programme or project has taken place. This will reduce risks.

A definition of quality assurance incorporates components and characteristics of M&E. QA is defined as the process that takes place before and during an event, in order to prevent errors from occurring in the first place (Sallis, 2002:17). Similarly, evaluation is defined as "the systematic assessment of the operation as well as the outcomes of a program or project, compared to a set of explicit or implicit standards, as a medium of contributing to the improvement of the program or project" (Weiss, 1998: 3). It is evident that quality assurance and evaluation establish a relationship between each other as both concepts make use of systems and procedures which have to be aligned to explicit or implicit standards, i.e. standard setting. What's more, both quality mechanisms are retrospective.

Significantly, both institutions refer to their monitoring and evaluation policy as "Management Review Policy" and "QMS Review Policy." The purpose of these policies is to explain how the institution's QMS will be reviewed and what the amendment process is. Yet the researcher

noted that no reference is made to "monitoring" or "evaluation" within these policies, although they serve as M&E mechanisms. It is a requirement that QMS be reviewed annually. Evidently, the reviewing process does take place, as this is noted in both institutions' policies along with their updated versions. However, the application of how the QMS is reviewed was not observed by the researcher and therefore the data at hand is relied upon (i.e. as stated on the policy). ***Institution 2***'s Management Review policy provides the agenda for the management review meeting, and ***Institution 1*** follows the same process.

A key finding is that ***Institution 1***'s policy mentions "analysis of conformance." However, the question that needs to be asked is how can conformance be analysed if no conformance processes are documented? The quality audit process and the practice are reviewed. Yet the policy lacks any indication of how reviewing is conducted or what mechanisms influence or contribute to changes. Despite both institutions holding weekly or monthly risk and compliance meetings (which is ultimately a monitoring process), this process is not documented in either policy.

V. RECOMMENDATIONS

- Both institutions have to consider documenting all non-conformity processes as an M&E mechanism along with any other undocumented processes or procedures.
- These mechanisms should then be documented into an M&E policy which separates academic and non-academic M&E mechanisms.

7.2.1.6. The Importance of the QMS and Quality Culture

Quality assurance is incorporated in TQM, whereby QA expands and develops TQM (Sallis, 2002:17). TQM establishes a quality-oriented culture. As such, the word 'total' in TQM dictates that everyone and everything in the organisation are involved in the enterprise of continuous improvement (Sallis, 2002:24). The 'management' in TQM also takes into account everyone, because everyone in the institution, regardless of their position or role, is the manager of their own responsibilities (Sallis, 2002:17). Therefore, TQM is an approach to quality improvement (Salder, 2013:291) and is a holistic management system which requires a system-wide quality culture in which everyone within the organisational hierarchy, from the bottom up, is accountable for their contribution to the whole – hence the 'total' in TQM (Doherty, 2012:89). Given these trends, it can be concluded that quality control, quality assurance and quality improvement are tools for monitoring and evaluation (M&E).

Distinctively, ISO does not promote aspects or characteristics of a quality culture; this policy guideline is mainly focused on risk and its impact, whereas ETDP SETA's Generic QMS is underpinned by the notion of 'quality culture.' Although the policy states that a QMS is "people-orientated, participative and *assumes* that quality culture is an integral part of an

organisation," the word 'assume' is emphasised as it implies that the implementation of a quality culture is not guaranteed. Notably, at both institutions the "Quality Management Policy" is a plan that defines the key processes, procedures, models together with core values and quality definitions which are underpinned by the institution in order for quality to be maintained.

What's more, both institutions' quality plan promotes a quality culture. However, ***Institution 1***'s Quality Management and QMS review policy do not explain or document how the institution promotes a quality culture. It is merely mentioned. ***Institution 2*** also states that a quality culture will be established as it is an integral and necessary part of the institution; yet no processes or procedures are indicated. Given that the observation was not conducted at ***Institution 2,*** it was challenging to deduce how a quality culture is implemented within the institution. However, the research process led to a finding that one of the institutions' core values is to be "Quality Driven." This value was exhibited in the foyer of the institution. To some extent, a culture of quality is promoted. Not only is this plaque a visible reminder for employees, but it forms part of the institution's value structure.

In ***Institution 1*** there was no visible signage of how quality culture is promoted. However, "standards" are incorporated in the institution's motto, which suggests that the institution has a quality objective to meet the set standards. In the observation it became evident that individuals did not meet the specific reporting deadlines which form part of the compliance documentation for the external moderation. Furthermore, the reporting documents were not filed after the project or programme had concluded. The observer noted that the reporting documents were inserted into the client files the day before the external moderation. This observation leads to questions about the institution's commitment to a quality culture.

Finally, the interview provided data on whether or not the employees are orientated or trained on how to sustain the institution's quality culture and to determine how the institution's quality culture has been implemented. ***Institution 1*** provides workshops to individuals who are directly involved in the practice of quality assurance. However, there is no evidence that orientation on the QMS and QA practice is provided to all employees within the institution, besides the workshops. Instead, participants in the study had to familiarise themselves on the QMS. Further research was conducted, and it was found that the institution's employment contract states that the individual has to take it upon him/herself to familiarise themselves on the QMS. Thus, it becomes the individual's responsibility to understand the QMS. This defeats the purpose of TQM. Furthermore, the participants do not have official institutional guidelines on how to conduct the QA process. Hence, within the other institutional department's certain aspects in

the QA process may be absent. As a result, the QA department has to double check the compliance documents.

In contrast, ***Institution 2*** provides orientation on the QMS and QA practices when the individual's contract commences, regardless of his or her designation or which department he or she reports too. In terms of overall risk, both institutions view any risk as high or critical. This implies that to some extent both institutions have an awareness that principles to maintain quality need to be adhered to.

XI. RECOMMENDATIONS

- ISO needs to review its QMS policy and promote quality culture initiatives.
- ETDP SETA should also review their Generic QMS and remove all words which do not guarantee a quality culture.
- ***Institution 1*** and ***Institution 2*** have to re-evaluate the QMS as their Review Policies in terms of how a culture of quality will be documented and implemented throughout the institution. As such, both institutions need to design a step-by-step process and indicate what mechanisms will be used. These can include workshops on quality, orientation workshops for all employees; monthly videos on quality which employees can watch; encourage employees to be a part of the QMS (often it is the support staff who pick up discrepancies between what is written in policies and what is actually practised); and holding awareness meetings with regards to any changes within the QMS.
- Although responsibility and accountability are endorsed, it should not be the new employee's responsibility to "familiarise" him/herself with the QMS and institutional processes and procedures. It is recommended that ***Institution 1*** considers implementing institutional orientation for new employees, as the new employee will not understand the QMS because he or she does not know the dynamics of the institution or how each policy is applied practically. Often what is written in the policies is not always applied in practice.

Given, these conclusions together with the trends, it can be concluded that maintaining quality is vital, whether the output that is produced is educational or a service. The type of approach to quality will determine the institution's output or outcome, given the climate experienced by the institution. Evidently, the policies of the public institution, i.e. ***Institution 2,*** are well established and provide more detail and context into how processes and procedures should be applied. Yet the way that these policies are applied in practice was not observed. Although the public institution's policies are concisely written, the researcher was unable to conclude whether these policies are implemented accordingly. The private institution, i.e. ***Institution 1,*** has more recommendations than the public institution does. Many of the recommendations provided were

drawn from **Institution 2's** practices. In addition, through analysing the findings, conclusions and providing recommendations, the research has deduced that **Institution 1** has an implementation issue along with limited policy design skills.

Taking into account the limitations of the study, to an extent the objective of this chapter has been reached, namely that of examining the importance of QA and its relationship to M&E.

7.2.2. Evaluating and Comparing the best International QA Practices

In order to address the objective of evaluating and comparing the best international QA practices, the researcher found three international Occupational Learning Systems (i.e. VET systems) that are similar to South Africa's. Examining these similar systems revealed a framework, structure or benchmark which could facilitate the avoidance of similar limitations or challenges that were addressed by the developers and implementors of these models. These systems were scrutinized, and a number of conclusions drawn, as outlined below.

All three systems consist of two frameworks. The Bangladeshi system consists of the National Training and Vocational Qualifications Framework (NTVQF) as well as the National Skills Quality Assessment System. In contrast, the Singaporean and Swiss systems include two different types of educational frameworks. Singapore consists of the Pre-employment Education and Training (PET) system as well as the Continuing Education and Training (CET) system, also known as the Workforce Skills Qualifications (WSQ) and the Swiss system consists of the Academic Baccalaureate system and the Dual-Track VET system.

These systems were compared to South Africa's OLS. The research process led to a finding that South Africa's educational system is divided into three educational frameworks. The systems were developed by identifying the gap in the educational system, in this instance skills training, as well as through trial and error. Each system had numerous challenges. The Bangladeshi VET system experienced a lack of support from institutions and industry and quality was inconsistent. The overarching aim of all three systems is to equip the workforce with the necessary competencies in order to ensure that members remain employable. This will in turn ensure that the country's workforce will be dynamic, professional and respond to market needs. This is also the aim of the South African OLS, whereas the Swiss VET system is implemented in the early stages of secondary education.

A key observation was that the OLS has significant similarities to Bangladesh's National Skills Quality Assessment System, in that both systems follow a similar QA process. As accreditation of competencies is nationally recognised, private and public training providers have to be registered; learning and assessment programmes need to be accredited; compliance audits of training providers are conducted against the quality standard; and tools of assessment are validated against the unit of competency. For VET to deliver quality and to be a success requires

registered training providers; the courses need to be accredited as well as registered and a benchmark of standard needs to be determined in order for quality to be measured against.

I. RECOMMENDATIONS

- For South Africa's skills challenge to be addressed and rectified, the change in quality as well as implementing OLS frameworks has to occur at basic education. Although this is a utopian recommendation, basic education has to make serious changes in its educational structure in order to compensate for the skills shortage. Once this foundation for improvement has been laid, the OLS can then be implemented at secondary level whereby learners can engage in Work Integrated Learning (WIL) subjects, which focus on a number of occupations.
- South Africa's Higher Education system needs to implement WIL components within its traditional academic courses, i.e. bachelor's degrees. Not only will this provide learners with workplace experience, but it will also benefit workplaces in terms of meeting their B-BBEE requirements. However, it is suggested that workplaces employ the learners once the learners have completed their WIL component.

In the light of this, it can be concluded that South Africa's OLS has incorporated certain components of other countries' VET structures as well as models. These models provide a benchmark for South Africa's OLS. Yet, the government needs to conduct an evaluative study in order to determine whether these best practice models are applied appropriately and whether the models are effective, or the government should consider developing a completely new OLS system, as each country's socio-economic context differs. The researcher has deduced that no further recommendations can be provided as South Africa's OLS system and QA process is fairly similar to these models.

The objective of this chapter has been achieved, evaluating and comparing the best international QA practices.

7.2.3. Assessing the Institutional Requirements of QA Practices within Vocational Institutions which underpin Occupational Learning and Quality Assurance in South Africa

For this objective to be addressed, the data in chapter 4 have to be backtracked, in order to assess the institutional requirements which, regulate QA practices in the OLS. These legislative requirements as well as governing frameworks have been established and developed continuously from lessons learned within the NQF and OLS systems, which were developed according to the country's educational and employment needs as well as its challenges. Conclusions and trends are noted below.

South Africa's educational legislation is underpinned by the Constitution. The skills development legislation has had extensive implications for the country's training and development sector (Warnich *et al*., 2015:341). This is because of the authoritarian restrictions which govern the OLS. The SAQA Act was promulgated to address the difficulties which potential learners experienced when judging the credibility and market value of training. As a result, an all-inclusive regulatory framework was developed that provided national standards to improve quality. A number of criteria and guidelines were developed along with the legislative frameworks. The following conclusions are drawn:

Despite the *Criteria and Guidelines for Providers* and *ETQAs* as well as the *QMS for ETQAs and Providers* being outdated, these documents are the foundation and initiators of a QMS, QA practices and standard setting. It is also worth noting that the ETDP SETA's Generic QMS was last updated in 2012. As a result, the guideline is dormant. Yet ***Institution 1*** and ***Institution 2*** still review the QMS annually. Recently, the researcher observed that all SAQA's policies and guidelines have been removed from SAQA's public domain. No communication is provided in terms of whether or not the statutory body is updating its policies, guidelines or criteria. Unlike SAQA, ETDP SETA and ISO, the QCTO does not supply providers with a guideline or framework on how the QMS functions. There are only PowerPoint presentations available on public search engines which explain the QCTO's QA framework. Consequently, the researcher is unable to deduce whether these presentations are part of the official QA framework.

I. ***RECOMMENDATIONS***

- SETAs as well as ISO need to meet the same QMS reviewing requirements for templates as vocational institutions, i.e. annually or at least every second year. This will prevent new vocational institutions from experiencing policy formulation and implementation issues within its QMS.
- SAQA should provide reasons or some form of communication on its public domain as to why documentation and publications have been removed.
- The QCTO is urged to publish an official QA policy framework or guideline for vocational institutions.

7.2.3.1. The implications of skills development legislation

Whilst analysing the institutional legislation and governing framework, the study revealed how extensive South Africa's skills development sector is. The study also showed how each Act was developed or improved on as the OLS developed, with the most significant amendments being the Skills Development Act of 2008 as well as the NQF Act of 2008, which repealed the SAQA Act of 1996. Yet these Acts provide limited guidance and support in terms QA practices. Furthermore, the SDA of 2008 introduces the three new quality councils along with a change

in the NQF's framework. These changes impacted on vocational institutions in terms of how they would adjust to the new frameworks as well as to the Quality Councils that govern these frameworks, keeping in mind DHET requirements as well. As each body has different quality requirements, this makes it difficult for providers to adhere to or follow these requirements.

These frameworks have separate statutory bodies, but their overarching governing body is the DHET. The researcher has deduced from the participatory observation and interview conducted with ***Institution 1*** as well as the interview conducted with ***Institution 2*** that these statutory bodies do not communicate with each other effectively. Consequently, the research process led to a finding that the Acts are confusing in terms of specific requirements which providers are required to adhere to. The skills development legislation along with the legislation that endorses and influences skills development together with the numerous policies and guidelines are not streamlined or aligned with each other. It has been deduced that skills development practices are not implemented within governmental institutions. In essence, government institutions are exempted from skills development initiatives, despite the fact that they are required to submit a WSP and an ATR.

II. RECOMMENDATIONS

- DHET together with the Quality Councils need to develop an effective communication network, not only for skills development requirements but also QA practices. These statutory bodies should consider developing committees whereby each body is represented in the forum and discussions are held in order to streamline requirements as well criteria. This would mitigate the challenges training providers and public TVET institutions face within their QMS. In addition, the forums should consider inviting QA managers to represent institutions so that QA managers can inform QCs of the challenges or limitations they face.
- Government needs to promote and exercise skills development practices within its departments, especially in the Department of Public Administration.

7.2.3.2. Implementing an official QA and QMS framework

Regarding the QCTO's public domain, the research process led to a finding that there is no QA framework, guideline or policy. The QC does not advise or inform vocational institutions about QA practices or which QA processes they need to adhere to. The researcher is uncertain whether the Quality Management Model presented in Chapter 4 is the official quality management system that is implemented within the QCTO. The Department of Labour commissions an introductory document about the QCTO whereby a number of limitations are addressed along with solutions. Yet no evidence has been provided in terms of whether or not the solutions to these limitations have been effective.

III. RECOMMENDATIONS

Similar to the QCTO's QA framework or policy, the QCTO needs to officially publish a quality management model. This will assist vocational institutions in terms of knowing what the QA criteria are.

In conclusion, it is evident that South Africa's skills development legislation is well written and designed; however, the way in which these legislative and policy frameworks are implemented shows a lack of initiative, managerial performance and effective execution. The objective of assessing the institutional requirements of QA practices within vocational institutions, which underpins the occupational learning and quality assurance in South Africa, has been achieved. However, there are no official data pertaining to the QCTO.

7.3. LIMITATIONS OF THE STUDY

One primary limitation to the study is the selection of certain institutional policies which influence, promote and implement quality, quality management and quality assurance within the two vocational institutions. If the research could to be challenged in any way, the researcher is able to argue and name the internal QMS policies that were selectively reviewed. In addition, the theoretical framework was influenced by the literature being outdated. At times, the observations were inherently objected to research bias and therefore, the researcher used multiple data gathering sources to verify the findings.

With regards to ***Institution 1***, ETDP SETA's Generic QMS was reviewed, and although the institution is accredited with four other SETAs, this policy was chosen as the ETDP SETA is the institution's primary SETA. Furthermore, the external moderator did not participate in the observation. The limitations related to ***Institution 2*** was more than ***Institution 1*** did. The first limitation to the study was that the participatory observation did not take place, as an external audit took place prior to the study being conducted. The researcher was unable to witness and observe the application of the QA practice. As a result, an internal audit was not necessary. Instead, the QA process was explained to the researcher and the necessary documentation which was needed for the audit process was shown to the researcher. Therefore, it is unknown whether the QA practices were implemented in the systematic and logical manner as described by the participant. This is because the actual observation did not take place. As a result, it cannot be concluded that ***Institution 2***'s QA practices are more streamlined than those of ***Institution 1***.

The researcher was unable to source the ISO 9001:2015 template. ISO allows limited access to this document as there is only a sample template of 9 pages. The entire document needs to be purchased. In addition, the researcher was unable to view student PoE. As a result, the researcher was unable to get practical access to the contents in the file.

7.4. CONCLUSION

Given the conclusions as well as recommendations presented this chapter, the researcher encourages the implementation of the recommended strategies provided in this chapter. Furthermore, the researcher will conduct feedback sessions with **the** QA manager and QA representatives of ***Institution 1*** and ***Institution 2*** with regard to the findings of the study, the limitations identified within the institutions' QA practices as well as QMS. The aim is to collectively share these recommendations.

These conclusions and recommendations conclude the thesis. The data of Case Study 1 and Case Study 2 provide plausible findings for ***Institution 1*** and ***Institution 2*****.** The implementation of the recommendations offered in this thesis can yield strategies which not only promote best QA practices but also prompts the government as well as statutory bodies to improve their legislative and policy frameworks which influence skills development and QA practices. These strategies will not only promote best QA practices but also encourage government as well as statutory bodies to improve those legislative and policy frameworks that influence skills development and QA practices.

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ADDENDUM 1

RESEARCH SCHEDULE

Name of Researcher: *Demi Melton*

Date completed:

Dear Participant:

Thank you for being willing to partake in this research study. I can assure you that this questionnaire is completely anonymous. None of the questionnaires requires your name. Further, each participant will be given a code so that none of the participants are identifiable. I kindly request you answer each question naturally, honestly and to the best of your ability.

SECTION A: GENERAL INFORMATION

1.1. How long have you been working at the institution?

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1.2. How long have you been working in the quality assurance department?

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1.3. How many people work in the quality assurance department?

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1.4. In your opinion, do you think the quality assurance department needs more people to assist in its day-to-day activities? Please explain

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1.5. How many of your colleagues at the organisation's other sites, are linked too or involved in the QA process?

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SECTION B: INSTITUTIONAL QUALITY ASSURANCE

2.1. Are you aware of the existence of the institution's Quality Management System (QMS)?

Yes	No	I am not sure
☐	☐	☐

2.2.1. If your answer was **YES** in 2.1. have you received any orientation of this policy since or during your time at the institution? Please explain.

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2.2. Briefly explain what your understanding of a QMS is.

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2.3. Does your institution have a hard copy (i.e. printed on paper) or a soft copy (i.e. stored on a computer) of the QMS?

Hard copy	Soft copy	I'm not sure
☐	☐	☐

2.4. Can you kindly state where the QMS is located, for both the hard copy and the soft copy.

Hard copy-

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Soft copy -

……

I'm not sure ☐

2.5. As a role-player in the Quality Assurance practice, how would you rate the organisation's overall awareness of risk *if* the quality standard has not been met?

Rating	**Description**	**Please explain**

5	Critical	
4	Serious	
3	Moderate	
2	Minimal	
1	None	

2.6. Do you think more people within the organisation should be *more* aware of the importance of QA? Please explain.

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2.7. Do you know who is responsible for amending (i.e. changing) and implementing any changes to the QMS? Please explain

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SECTION C: QA SYSTEMS AND PROCESSES

3.1. When amendments (i.e. changes) are made to the QMS, are you made aware of these changes? Please explain

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3.2. When conducting a quality audit, are there standard operating procedures/processes which you follow? Please explain

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3.2.1. Are these procedures official institutional procedures/processes (i.e. is there a policy for the quality audit process which provide step-by-step instructions on how this process should be conducted)?

Yes ☐ No ☐ I am not sure ☐

3.2.2. If your answer was **YES** in 3.2.1, kindly provide the policy's or instruction guide's name.

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3.2.3. If your answer was **NO/ I'M NOT SURE** in 3.2.1, kindly explain how the you were taught/showed the quality audit process.

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3.3. When conducting a quality audit, do you follow a checklist to ensure that all the documents are in place?

Yes ☐ No ☐ I am not sure ☐

3.3.1 If **YES,** does this checklist assist in making sure that the quality meets the required standard, and does it assist in making the process easier?

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3.3.2. If **NO,** would having a checklist make the QA process easier?

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3.3. In your opinion, is the quality process standardised throughout the organisation (i.e. is all the requirements the same and in place when conducting quality control)? Please explain.

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3.4. Are there any other problems or issues you wish to bring the researchers attention which have not been mentioned above?

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3.5. In your opinion, what can be done to improve the organisation's quality assurance process?

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Thank you for your participation!